

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

DEMOCRATIC PARTY OF ILLINOIS

ADDRESS (number and street)

P.O. BOX 518

☐ Check if different than previously reported. (ACC)

SPRINGFIELD

IL

62705

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00167015

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

10

16

2014

through

M M M / D D D / Y Y Y Y Y Y

11

24

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Kasper

Signature of Treasurer

Michael Kasper

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

12

04

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X

Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DEMOCRATIC PARTY OF ILLINOIS

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y Y 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		763467.65
(b) Cash on Hand at Beginning of Reporting Period.....	1145217.83	
(c) Total Receipts (from Line 19)	1367195.10	5503283.24
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2512412.93	6266750.89
7. Total Disbursements (from Line 31)	1291813.09	5046151.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1220599.84	1220599.84
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

DEMOCRATIC PARTY OF ILLINOIS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	123115.00	637344.00
(ii) Unitemized	969.40	11493.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	124084.40	648837.00
(b) Political Party Committees	0.00	56954.47
(c) Other Political Committees (such as PACs).....	994704.00	3088535.94
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ►	1118788.40	3794327.41
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	44393.32	422250.13
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	39015.64	338805.50
(b) Levin Funds (from Schedule H5)	164997.74	947900.20
(c) Total Transfers (add 18(a) and 18(b))..	204013.38	1286705.70
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ►	1367195.10	5503283.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	1163181.72	4216577.54

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	7029.25	135391.68
(ii) Non-Federal Share.....	26443.25	509330.83
(b) Other Federal Operating Expenditures	11398.34	30159.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	44870.84	674882.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	22897.07	331136.52
(ii) "Levin" Share.....	86136.61	1245704.04
(b) Federal Election Activity Paid Entirely With Federal Funds	1137908.57	2794428.32
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	1246942.25	4371268.88
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1291813.09	5046151.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1179233.23	3291116.18

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1118788.40	3794327.41
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1118788.40	3794327.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	18427.59	165551.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	18427.59	165551.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 162

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Jonathan Aaron

Mailing Address 1990 Deerfield Road

City State Zip Code
 Highland Park IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Warren Park Living Center

Occupation

Admin.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1565.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 19 / 2014

Transaction ID : SA11AI.36277

Amount of Each Receipt this Period

1565.00

Full Name (Last, First, Middle Initial)

B. Isaac Akridge

Mailing Address 3007 200th Place

City State Zip Code
 Lynwood IL 60411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Director of New Business

Occupation

Com Ed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11AI.36226

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ambrosino Muir Hansen Crounse

Mailing Address 500 Sansome Street

City State Zip Code
 San Francisco CA 94111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11AI.36833

Amount of Each Receipt this Period

15750.00

Mail House

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

17815.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. John Arado

Mailing Address 225 W. Wacker # 3000

City
Chicago

State
IL

Zip Code
60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wildman Harrold Allen and Dixon

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 13 / 2014

Transaction ID : SA11AI.36349

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Natalie H Bernardoni

Mailing Address 641 W Willow St, Apt 209

City
Chicago

State
IL

Zip Code
60614-5172

FEC ID number of contributing
federal political committee.

C

Name of Employer

Natalie k Holzman

Occupation

Clinical Social Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

10 / 31 / 2014

Transaction ID : SA11AI.36842

Amount of Each Receipt this Period

475.00

IL Party Victory Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. M. Blaise

Mailing Address 3117 S Prairie

City
Chicago

State
IL

Zip Code
60616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Com Ed

Occupation

Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

10 / 16 / 2014

Transaction ID : SA11AI.36228

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1900.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.36842

IL Party Victory Fund

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Kevin Brookins

Mailing Address 2409 Athens Road

City State Zip Code
 Olympia Fields IL 60461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Com Ed

Senior vice president

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11AI.36229

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Don Burgess

Mailing Address 4219 Bushy Prairie Rd

City State Zip Code
 Fults IL 62244-1143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.36835

Amount of Each Receipt this Period

285.00

IL Party Victory Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Calvin Butler

Mailing Address 3605 Trailee Court

City State Zip Code
 Naperville IL 60564

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Exelon

VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11AI.36230

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5500.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.36835

IL Party Victory Fund

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 162

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Joan Callis

Mailing Address 3136 Harvard

City

Granite City

State

IL

Zip Code

62040-3636

FEC ID number of contributing federal political committee.

C

Name of Employer

Housewife

Occupation

Housewife

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.36297

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Lance Callis

Mailing Address 3136 Haryard

City

Granite City

State

IL

Zip Code

62040

FEC ID number of contributing federal political committee.

C

Name of Employer

Self employed

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.36299

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Melissa Callis

Mailing Address 2306 Timber Ridge

City

Saint Jacob

State

IL

Zip Code

62281

FEC ID number of contributing federal political committee.

C

Name of Employer

Lascelleshire, LLC

Occupation

Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.36300

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)..... ►

30000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 162

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Valerie Colletti

Mailing Address 348 Buckingham CT

City	State	Zip Code
Lombard	IL	60148

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Com Ed

Director Regional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.36231

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Marlow Colvin

Mailing Address 8901 S. Bennett Avenue

City	State	Zip Code
Chicago	IL	60617

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Com Ed

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	16	/	2014

Transaction ID : SA11AI.36232

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Paul Connolly

Mailing Address 12600 S 100TH Ave

City	State	Zip Code
Palos Park	IL	60464

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Liuna Local

Union Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2014

Transaction ID : SA11AI.36840

Amount of Each Receipt this Period

213.75

IL Party Victory Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2500.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.36840

IL Party Victory Fund

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 162

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Christopher Crane

Mailing Address 2450 Persimmon Drive

City	State	Zip Code
St. Charles	IL	60174

FEC ID number of contributing federal political committee.

C

Name of Employer

Exelon

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2014

Transaction ID : SA11AI.36288

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Christopher D Cribaro

Mailing Address 5020 N Delphia Ave

City	State	Zip Code
Chicago	IL	60656-2919

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2014

Transaction ID : SA11AI.36838

Amount of Each Receipt this Period

760.00

IL Party Victory Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DNC Services Corp

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3740.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2014

Transaction ID : SA11AI.36846

Amount of Each Receipt this Period

3740.15

IL Party Victory Fund Unitemized

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.36838

IL Party Victory Fund

Form/Schedule: SA11AI

Transaction ID: SA11AI.36846

IL Party Victory Fund

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 162

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. James Dowd

Mailing Address 900 S. Price Road

City

Saint Louis

State

MO

Zip Code

63124

FEC ID number of contributing
federal political committee.

C

Name of Employer

James R. David Esq

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 01 / 2014

Transaction ID : SA11AI.36326

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Mark Falcone

Mailing Address 762 Fox Run Drive

City

Geneva

State

IL

Zip Code

60134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Com Ed

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11AI.36235

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. David Fein

Mailing Address 680 Carriage Way

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Exelon

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11AI.36236

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

10750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. James Firth

Mailing Address 550 N. Kingsbury

City

Chicago

State

IL

Zip Code

60654

FEC ID number of contributing
federal political committee.

C

Name of Employer

Exelon

Occupation

VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11AI.36237

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Dennis Gannon

Mailing Address 14026 Persimmon Drive

City

Orland Park

State

IL

Zip Code

60467

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11AI.36238

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Juan Gaytan

Mailing Address 1 Bell Oak Lane

City

Lemont

State

IL

Zip Code

60439

FEC ID number of contributing
federal political committee.

C

Name of Employer

Monterey Securities

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11AI.36263

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6000.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Veronica Gomez

Mailing Address 337 N Paulina Street

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Exelon Corporation

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2014			

Transaction ID : SA11AI.36289

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Stephen Grant

Mailing Address 1133 Broadmoor Place

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Objective Arts, Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2014			

Transaction ID : SA11AI.36342

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Brian Grossman

Mailing Address 180 N. LaSalle Street

City

Chicago

State

IL

Zip Code

60601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Illinois Property Tax Lawyers

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2014			

Transaction ID : SA11AI.36290

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 162
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Michael Guerra

Mailing Address 315 S. Knight Avenue

City State Zip Code
 Park Ridge IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Exelon

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 16 2014

Transaction ID : SA11AI.36239

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Ross Hemphill

Mailing Address 4 N.221 Ferson Creek Road

City State Zip Code
 St. Charles IL 60174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vice President

Occupation

Com Ed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 16 2014

Transaction ID : SA11AI.36240

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Scott Humbard

Mailing Address 11755 Glenn Circle

City State Zip Code
 Plainfield IL 60544

FEC ID number of contributing
federal political committee.

C

Name of Employer

Com Ed

Occupation

Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 16 2014

Transaction ID : SA11AI.36242

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 162

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Val Jensen

Mailing Address 3150 Naranja Drive

City State Zip Code
 Walnut Creek GA 94598

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Com Ed

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 16 2014

Transaction ID : SA11AI.36243

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Mark Kanavos

Mailing Address P.O. Box 236

City State Zip Code
 Braidwood IL 60408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Plant Manager

Com Ed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 16 2014

Transaction ID : SA11AI.36244

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Peter Karaba

Mailing Address 5327 Coneflower Drive

City State Zip Code
 Naperville IL 60564

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Exelon

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 16 2014

Transaction ID : SA11AI.36246

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Jeffrey Katzenberg

Mailing Address 11400 W. Olympic Boulevard

City State Zip Code
 Los Angeles CA 90064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dreamworks

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
 11 / 01 / 2014

Transaction ID : SA11AI.36337

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Katrina W. Kelley Ms.

Mailing Address 429 Linden St

City State Zip Code
 Winnetka IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

MM / DD / YYYY
 10 / 20 / 2014

Transaction ID : SA11AI.36837

Amount of Each Receipt this Period

190.00

IL Party Victory Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Barbara King

Mailing Address 10 Juanita Place

City State Zip Code
 Belleville IL 62223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self employed

Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
 10 / 17 / 2014

Transaction ID : SA11AI.36265

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10500.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.36837

IL Party Victory Fund

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Joseph P Koval Mr.

Mailing Address 215 E Olive St

City

Staunton

State

IL

Zip Code

62088-1428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2014

Transaction ID : SA11AI.36844

Amount of Each Receipt this Period

237.50

IL Party Victory Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Fidel Marquez

Mailing Address 4314 N. Claremont Avenue

City

Chicago

State

IL

Zip Code

60618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Com Ed

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11AI.36248

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

C. William McBride

Mailing Address 511 Brownstone Drive

City

St. Charles

State

IL

Zip Code

60174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Com Ed

Occupation

VP Dist. Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2014

Transaction ID : SA11AI.36279

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4500.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.36844

IL Party Victory Fund

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Lester H. McKeever

Mailing Address 4950 S. Chicago

City

Chicago

State

IL

Zip Code

60615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Washington, Pittman

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 01 / 2014

Transaction ID : SA11AI.36330

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Guy Medaglia

Mailing Address 94 Timberlane

City

Hilton Head Island

State

SC

Zip Code

29926

FEC ID number of contributing
federal political committee.

C

Name of Employer

CEO

Occupation

St. Anthonys Hospital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 17 / 2014

Transaction ID : SA11AI.36267

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Meribeth Mermall

Mailing Address 901 S. Plymouth Court

City

Chicago

State

IL

Zip Code

60605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Com Ed

Occupation

Director Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 16 / 2014

Transaction ID : SA11AI.36249

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Arthur Miller

Mailing Address 636 W. Oak Street

City State Zip Code
 Chicago IL 60610

FEC ID number of contributing
federal political committee.

C

Name of Employer

M21 Construction

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11AI.36250

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Stephen Morill

Mailing Address 300 N. LaSalle Drive

City State Zip Code
 Chicago IL 60654

FEC ID number of contributing
federal political committee.

C

Name of Employer

Morrill & Associates, PC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 01 / 2014

Transaction ID : SA11AI.36313

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Jessica O'Brien

Mailing Address 1131 S. Park Terrace

City State Zip Code
 Chicago IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer

IL Lottery State of IL

Occupation

Acting Chief counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.36303

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

4800.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Thomas O' Neill

Mailing Address 1448 N. Lake Shore

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Com Ed

Occupation

Senior Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2014			

Transaction ID : SA11AI.36233

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Kenneth Podeschi

Mailing Address 905 Virginia Avenue

City

Taylorville

State

IL

Zip Code

62568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Illinois Secretary of State

Occupation

Securities Investigator

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2014			

Transaction ID : SA11AI.36314

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Alex Preston

Mailing Address 150 Edwards Street

City

Bulpitt

State

IL

Zip Code

62517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Priter Brooker

Occupation

Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2014			

Transaction ID : SA11AI.36317

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3300.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Sheridan Pulley

Mailing Address 901 E. Main Cross

City

Taylorville

State

IL

Zip Code

62568-1848

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self employed

Occupation

CPA

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2014

Transaction ID : SA11AI.36315

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Warren Ribley

Mailing Address 811 S. Lytle Street

City

Chicago

State

IL

Zip Code

60607

FEC ID number of contributing
federal political committee.

C

Name of Employer

IL Med. District

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2014

Transaction ID : SA11AI.36269

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Warren Ribley

Mailing Address 811 S. Lytle Street

City

Chicago

State

IL

Zip Code

60607

FEC ID number of contributing
federal political committee.

C

Name of Employer

IL Med. District

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2014

Transaction ID : SA11AI.36307

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

2300.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Mohammed Saleem

Mailing Address 3751 W. Devon Avenue

City State Zip Code
Chicago IL 60659

FEC ID number of contributing
federal political committee.

C

Name of Employer

AES Services

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2014

Transaction ID : SA11AI.36347

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Richard Shapiro

Mailing Address 12 Scented Path Lane

City State Zip Code
The Woodlands TX 77381

FEC ID number of contributing
federal political committee.

C

Name of Employer

Public Affairs Engagement

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11AI.36252

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Sheila A. Smith

Mailing Address 338 S. Washington Drive

City State Zip Code
Sarsota FL 34236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Consult, Ltd.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11AI.36331

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Elizabeth Tisdahl

Mailing Address 2 Martha Lane

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tisdahl Foundation

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2014			

Transaction ID : SA11AI.36333

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Lance Tyson

Mailing Address 400 E. South Water Street

City

Chicago

State

IL

Zip Code

60601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kutak Rock, LLP

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2014			

Transaction ID : SA11AI.36271

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Robert Vibon

Mailing Address 2806 Blackhawk

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer

IL Property Tax Lawyers Assoc.

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2014			

Transaction ID : SA11AI.36292

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

2000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Harold Vinyard

Mailing Address 1405 James Court

City State Zip Code
 Ottawa IL 61350

FEC ID number of contributing
federal political committee.

C

Name of Employer

Exelon

Occupation

Plant Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 16 2014

Transaction ID : SA11AI.36254

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Scott Vogt

Mailing Address 11369 Laura Lane

City State Zip Code
 Frankfort IL 60423

FEC ID number of contributing
federal political committee.

C

Name of Employer

Com Ed

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 16 2014

Transaction ID : SA11AI.36256

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Charles Walls

Mailing Address 9740 S. Peoria

City State Zip Code
 Chicago IL 60643

FEC ID number of contributing
federal political committee.

C

Name of Employer

Com Ed

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 16 2014

Transaction ID : SA11AI.36258

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Jeffrey Williams

Mailing Address 605 Hayton Court

City

Shorewood

State

IL

Zip Code

60404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Exelon

Occupation

Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11AI.36259

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Jeffrey Williams

Mailing Address 605 Hayton Court

City

Shorewood

State

IL

Zip Code

60404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Exelon

Occupation

Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11AI.36260

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Richard Worssek

Mailing Address 2086 Park Lane

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

IL Property Tax Lawyers

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

Transaction ID : SA11AI.36294

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1500.00

TOTAL This Period (last page this line number only)..... ►

123115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. DAN LIPINSKI FOR CONGRESS

Mailing Address 4501 GRAND

City State Zip Code
 WESTERN SPRINGS IL 60558

FEC ID number of contributing
federal political committee.

C C00405431

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / 22 / 2014

Transaction ID : SA11C.36282

Amount of Each Receipt this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1980379.06

Date of Receipt

10 / 17 / 2014

Transaction ID : SA11C.36261

Amount of Each Receipt this Period

126435.00

Contribution

Full Name (Last, First, Middle Initial)

C. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2093364.06

Date of Receipt

10 / 24 / 2014

Transaction ID : SA11C.36296

Amount of Each Receipt this Period

112985.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

241920.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2243319.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11C.36341

Amount of Each Receipt this Period

149955.00

Contribution

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2561909.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2014

Transaction ID : SA11C.36309

Amount of Each Receipt this Period

318590.00

Contribution

Full Name (Last, First, Middle Initial)

C. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2637689.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA11C.36340

Amount of Each Receipt this Period

65000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

533545.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2643689.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2014			

Transaction ID : SA11C.36357

Amount of Each Receipt this Period

6000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2732589.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2014			

Transaction ID : SA11C.36358

Amount of Each Receipt this Period

88900.00

Contribution

Full Name (Last, First, Middle Initial)

C. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2763254.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2014			

Transaction ID : SA11C.36359

Amount of Each Receipt this Period

30665.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125565.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2808754.52

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11C.36360

Amount of Each Receipt this Period

45500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Democratic National Committee

Mailing Address 430 South Capitol St. SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43880.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11C.36262

Amount of Each Receipt this Period

4840.00

SPP Allocation

Full Name (Last, First, Middle Initial)

C. EMILY'S LIST

Mailing Address 1800 M STREET, NW
STE 375N

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C C00193433

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11C.36302

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52840.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial)
ENERGY TRANSFER EMPLOYEE MANAGEMENT COMPANY PAC (ENERGY TRANSFER PAC)

Mailing Address 400 W. 15TH ST.
SUITE 720

City State Zip Code
AUSTIN TX 78701

FEC ID number of contributing
federal political committee.

C C00438754

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11C.36304

Amount of Each Receipt this Period

1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
FRIENDS OF DICK DURBIN COMMITTEE

Mailing Address PO BOX 1949

City State Zip Code
SPRINGFIELD IL 62705

FEC ID number of contributing
federal political committee.

C C00148999

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

71334.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11C.36281

Amount of Each Receipt this Period

6334.00

Contribution

C. Full Name (Last, First, Middle Initial)
GREAT LAND PAC

Mailing Address 700 13TH STREET, NW
SUITE 600

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00457747

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11C.36328

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12334.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. HOYER FOR CONGRESS

Mailing Address 700 13TH STREET, NW
SUITE 600

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00140715

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6235.76

Date of Receipt

10 / **22** / **2014**

Transaction ID : SA11C.36283

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. HOYER FOR CONGRESS

Mailing Address 700 13TH STREET, NW
SUITE 600

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00140715

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11235.76

Date of Receipt

10 / **29** / **2014**

Transaction ID : SA11C.36306

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. MCAPILOT MANAGEMENT / MWH AMERICAS PAC

Mailing Address 380 Interlocken Crescent
Suite 200

City State Zip Code
Broomfield CO 80021

FEC ID number of contributing
federal political committee.

C C00242370

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **01** / **2014**

Transaction ID : SA11C.36312

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. MIDDLE CLASS AMERICA PAC

Mailing Address PO BOX 521

City State Zip Code
WESTERN SPRINGS IL 60558

FEC ID number of contributing
federal political committee.

C C00486860

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

10 / **22** / **2014**

Transaction ID : SA11C.36284

Amount of Each Receipt this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. SCHNEIDER FOR CONGRESS

Mailing Address 487 MEADOWLARK DRIVE

City State Zip Code
SARASOTA FL 34236

FEC ID number of contributing
federal political committee.

C C00374751

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9000.00

Date of Receipt

10 / **22** / **2014**

Transaction ID : SA11C.36280

Amount of Each Receipt this Period

6000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Treasury Employees PAC

Mailing Address 1750 H. Street NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **01** / **2014**

Transaction ID : SA11C.36335

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

13500.00

TOTAL This Period (last page this line number only)..... ►

994704.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. 47th Ward Regular Democratic Organization

Mailing Address 2018 W. Wilson

City State Zip Code
 Chicago IL 60625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 17 2014

Transaction ID : SA17.36273

Amount of Each Receipt this Period

750.00

Voter file

Full Name (Last, First, Middle Initial)

B. Citizens for Callis

Mailing Address 1922 Edwardsville Club Plaza

City State Zip Code
 Edwardsville IL 62025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8700.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 13 2014

Transaction ID : SA17.36353

Amount of Each Receipt this Period

5700.00

Full Name (Last, First, Middle Initial)

C. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2572689.52

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2014

Transaction ID : SA17.36851

Amount of Each Receipt this Period

10780.46

In-kind - Rent, occupancy for the 10 IL field offices

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

17230.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Friends of Ameya Pawar

Mailing Address P.O. Box 577162

City State Zip Code
 Chicago IL 60657

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

11 / 01 / 2014

Transaction ID : SA17.36324

Amount of Each Receipt this Period

750.00

Voter file

Full Name (Last, First, Middle Initial)

B. Friends of David Gonzalez

Mailing Address 2617 Chicago Road

City State Zip Code
 So. Chicago IL 60411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

10 / 17 / 2014

Transaction ID : SA17.36275

Amount of Each Receipt this Period

750.00

Voter file

Full Name (Last, First, Middle Initial)

C. HOYER FOR CONGRESS

Mailing Address 700 13TH STREET, NW
 SUITE 600

City State Zip Code
 WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00140715

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1101.08

Date of Receipt

10 / 20 / 2014

Transaction ID : SA17.36847

Amount of Each Receipt this Period

483.20

In-kind - Travel on 10-07-14

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1983.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. HOYER FOR CONGRESS

Mailing Address 700 13TH STREET, NW
SUITE 600

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00140715

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1235.76

Date of Receipt

10 / **20** / **2014**

Transaction ID : SA17.36849

Amount of Each Receipt this Period

134.68

In-kind - Travel on 10-13-14

Full Name (Last, First, Middle Initial)

B. Internal Revenue Service

Mailing Address Department of the Treasury

City State Zip Code
Kansas City MO 64999

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1668.55

Date of Receipt

10 / **31** / **2014**

Transaction ID : SA17.36308

Amount of Each Receipt this Period

1668.55

Payroll taxes refund

Full Name (Last, First, Middle Initial)

C. P2 Consulting, Inc.

Mailing Address 22 W. Washington

City State Zip Code
Chicago IL 60602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

11 / **01** / **2014**

Transaction ID : SA17.36322

Amount of Each Receipt this Period

10000.00

Voter file

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11803.23

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. VLM Cooperative

Mailing Address P.O. Box 9

City Lexington State KY Zip Code 40588

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

28816.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 13 / 2014

Transaction ID : SA17.36352

Amount of Each Receipt this Period

13376.43

Voter file

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13376.43

44393.32

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

DEMOCRATIC PARTY OF ILLINOIS

Three digital displays showing the date 10/31/2014 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '31' with 'D' indicators above it. The third display shows '2014' with 'Y' indicators above it.

Category/
Type

10780.46

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Category/
Type

483.20

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Category/
Type

134.68

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

11398.34

11398.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. ABCompuprint

Mailing Address P.O. Box 9594

City	State	Zip Code
Springfield	IL	62791

Purpose of Disbursement
Cook County walk cards

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SB30B.36366

Amount of Each Disbursement this Period

19200.00

Full Name (Last, First, Middle Initial)

B. Ace Hardware

Mailing Address 239 N. Genesee Street

City	State	Zip Code
Waukegan	IL	60085

Purpose of Disbursement
N-Keys and flashlights

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB30B.36723

Amount of Each Disbursement this Period

28.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Andrew Adamski

Mailing Address 3 Winston Road

City	State	Zip Code
East Lyme	CT	06333

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36474

Amount of Each Disbursement this Period

1972.24

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

21172.24

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Andrew Adamski

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Mailing Address 3 Winston Road

City	State	Zip Code
East Lyme	CT	06333

Transaction ID : SB30B.36527Purpose of Disbursement
Campaign expenses-H

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1500.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Andrew Adamski

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Mailing Address 3 Winston Road

City	State	Zip Code
East Lyme	CT	06333

Transaction ID : SB30B.36639Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1786.76

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address P.O. Box 842854

City	State	Zip Code
Boston	MA	02284

Transaction ID : SB30B.36813Purpose of Disbursement
Payroll taxes

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

32706.91

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35993.67

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address P.O. Box 842854

City	State	Zip Code
Boston	MA	02284

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36816

Amount of Each Disbursement this Period

16771.56

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address P.O. Box 842854

City	State	Zip Code
Boston	MA	02284

Purpose of Disbursement
Payroll fee

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36819

Amount of Each Disbursement this Period

791.49

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address P.O. Box 842854

City	State	Zip Code
Boston	MA	02284

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB30B.36821

Amount of Each Disbursement this Period

6337.34

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

23900.39

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address P.O. Box 842854

City	State	Zip Code
Boston	MA	02284

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB30B.36822

Amount of Each Disbursement this Period

1068.82

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address P.O. Box 842854

City	State	Zip Code
Boston	MA	02284

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36825

Amount of Each Disbursement this Period

9194.93

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address P.O. Box 842854

City	State	Zip Code
Boston	MA	02284

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36826

Amount of Each Disbursement this Period

40221.09

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50484.84

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. May Affre

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Mailing Address 1803 Country Drive
Apt. 301

City Grayslake State IL Zip Code 60030

Purpose of Disbursement
Wages

Candidate Name

Category/
Type**Transaction ID : SB30B.36488**

Amount of Each Disbursement this Period

1108.53

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. May Affre

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2014

Mailing Address 1803 Country Drive
Apt. 301

City Grayslake State IL Zip Code 60030

Purpose of Disbursement
Wages

Candidate Name

Category/
Type**Transaction ID : SB30B.36695**

Amount of Each Disbursement this Period

1255.05

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Gregory Aguele

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Mailing Address 70-26 72nd Street

City Glendale State NY Zip Code 11385

Purpose of Disbursement
Wages

Candidate Name

Category/
Type**Transaction ID : SB30B.36542**

Amount of Each Disbursement this Period

735.93

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3099.51

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 162

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Gregory Aguele

Mailing Address 70-26 72nd Street

City	State	Zip Code
Glendale	NY	11385

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36663

Amount of Each Disbursement this Period

1255.05

Full Name (Last, First, Middle Initial)

B. Collin Akers

Mailing Address 616 Sherman Avenue

City	State	Zip Code
Edwardsville	IL	62025

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36475

Amount of Each Disbursement this Period

1268.76

Full Name (Last, First, Middle Initial)

C. Collin Akers

Mailing Address 616 Sherman Avenue

City	State	Zip Code
Edwardsville	IL	62025

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36640

Amount of Each Disbursement this Period

1227.27

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3751.08

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Anastasia Almasi

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2014

Mailing Address 1825 Holmes Avenue

City	State	Zip Code
Springfield	IL	62704

Transaction ID : SB30B.36419Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1088.07

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. ASM Sales

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Mailing Address Bill Payment Center

City	State	Zip Code
Decatur	IL	62521

Transaction ID : SB30B.36514Purpose of Disbursement
G-event booth

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

35.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. AT & T Store

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

Mailing Address 59 Skokie Valley Road

City	State	Zip Code
Highland Park	IL	60035

Transaction ID : SB30B.36716Purpose of Disbursement
N-Phone minutes

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

256.39

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1088.07

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. ATT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Mailing Address 208 South Akard Street

City	State	Zip Code
Dallas	TX	75202

Purpose of Disbursement
B-Telephone

Candidate Name

Category/
Type**Transaction ID : SB30B.36406**

Amount of Each Disbursement this Period

1680.53

[MEMO ITEM]

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Saeid Barghi

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Mailing Address 1211 Lockwood Drive

City	State	Zip Code
Buffalo Grove	IL	60089

Purpose of Disbursement
Wages

Candidate Name

Category/
Type**Transaction ID : SB30B.36544**

Amount of Each Disbursement this Period

1083.84

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Saeid Barghi

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Mailing Address 1211 Lockwood Drive

City	State	Zip Code
Buffalo Grove	IL	60089

Purpose of Disbursement
Wages

Candidate Name

Category/
Type**Transaction ID : SB30B.36664**

Amount of Each Disbursement this Period

1227.98

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2311.82

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Sakina Bennett

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address 7345 Amherst Avenue

City	State	Zip Code
Saint Louis	MO	63130

Purpose of Disbursement
Wages

Candidate Name

Category/
Type**Transaction ID : SB30B.36476**

Amount of Each Disbursement this Period

1108.54

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Sakina Bennett

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Mailing Address 7345 Amherst Avenue

City	State	Zip Code
Saint Louis	MO	63130

Purpose of Disbursement
Wages

Candidate Name

Category/
Type**Transaction ID : SB30B.36641**

Amount of Each Disbursement this Period

1074.18

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Bryan Besser

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Mailing Address 365 Dogwood Terrace

City	State	Zip Code
Buffalo Grove	IL	60089

Purpose of Disbursement
Wages

Candidate Name

Category/
Type**Transaction ID : SB30B.36545**

Amount of Each Disbursement this Period

1083.85

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3266.57

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Bryan Besser

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2014

Mailing Address 365 Dogwood Terrace

Transaction ID : SB30B.36665

City	State	Zip Code
Buffalo Grove	IL	60089

Amount of Each Disbursement this Period

Purpose of Disbursement
WagesCategory/
Type

1227.98

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Steffanie Bezruki

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Mailing Address 57 Rhode Island Avenue

Transaction ID : SB30B.36489

City	State	Zip Code
Washington	DC	20001

Amount of Each Disbursement this Period

Purpose of Disbursement
WagesCategory/
Type

1108.54

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Steffanie Bezruki

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2014

Mailing Address 57 Rhode Island Avenue

Transaction ID : SB30B.36696

City	State	Zip Code
Washington	DC	20001

Amount of Each Disbursement this Period

Purpose of Disbursement
WagesCategory/
Type

1255.05

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3591.57

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

DEMOCRATIC PARTY OF ILLINOIS

Category/
Type

1112.97

Category/
Type

1259.49

Category/
Type

9696.82

12069.28

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Wesley Boensel

Mailing Address 15671 Sunset Street

City
PetersburgState
ILZip Code
62675Purpose of Disbursement
Wages

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36426

Amount of Each Disbursement this Period

1	7	4	7	.	6	1
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Sylvia Bowman

Mailing Address 1918 Clover Avenue

City
RockfordState
ILZip Code
61102Purpose of Disbursement
Wages

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36490

Amount of Each Disbursement this Period

1	0	8	3	.	8	5
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Sylvia Bowman

Mailing Address 1918 Clover Avenue

City
RockfordState
ILZip Code
61102Purpose of Disbursement
Wages

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36697

Amount of Each Disbursement this Period

1	2	2	7	.	9	8
---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4	0	5	9	.	4	4
---	---	---	---	---	---	---

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Amy Brown

Mailing Address 39 Regent Drive

City	State	Zip Code
Gilbens	IL	60136

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36547

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

B. Amy Brown

Mailing Address 39 Regent Drive

City	State	Zip Code
Gilbens	IL	60136

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36667

Amount of Each Disbursement this Period

1227.98

Full Name (Last, First, Middle Initial)

C. Ian Bruckner

Mailing Address 941 Highland Lane

City	State	Zip Code
Irvington	NY	10533

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36548

Amount of Each Disbursement this Period

1083.85

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3395.68

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Ian Bruckner

Mailing Address 941 Highland Lane

City	State	Zip Code
Irvington	NY	10533

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36668

Amount of Each Disbursement this Period

1227.99

Full Name (Last, First, Middle Initial)

B. Brenda Carrillo

Mailing Address 2919 Wichita Avenue

City	State	Zip Code
Amarillo	TX	79107

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36491

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

C. Brenda Carrillo

Mailing Address 2919 Wichita Avenue

City	State	Zip Code
Amarillo	TX	79107

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36698

Amount of Each Disbursement this Period

1227.98

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3539.82

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Michael Carson

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2014			

Mailing Address 3821 N. Damen Avenue

City	State	Zip Code
Chicago	IL	60618

Transaction ID : SB30B.36435Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1754.84

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Michael Carson

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2014			

Mailing Address 3821 N. Damen Avenue

City	State	Zip Code
Chicago	IL	60618

Transaction ID : SB30B.36625Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

75.59

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Central Management Services

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2014			

Mailing Address P.O. Box 10077

City	State	Zip Code
Springfield	IL	62791

Transaction ID : SB30B.36630Purpose of Disbursement
Insurance

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

898.71

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2729.14

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Central Management Services

Mailing Address P.O. Box 10077

City	State	Zip Code
Springfield	IL	62791

Purpose of Disbursement
Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB30B.36631

Amount of Each Disbursement this Period

323.93

Full Name (Last, First, Middle Initial)

B. Central Management Services

Mailing Address P.O. Box 10077

City	State	Zip Code
Springfield	IL	62791

Purpose of Disbursement
Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB30B.36632

Amount of Each Disbursement this Period

315.89

Full Name (Last, First, Middle Initial)

C. Emily Cheong

Mailing Address 3895 Anjou Lane

City	State	Zip Code
Hoffman Estates	IL	60192

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36549

Amount of Each Disbursement this Period

1083.85

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1723.67

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Emily Cheong

Mailing Address 3895 Anjou Lane

City	State	Zip Code
Hoffman Estates	IL	60192

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36669

Amount of Each Disbursement this Period

1227.99

Full Name (Last, First, Middle Initial)

B. Ronald Chiu

Mailing Address 18248 Cork Road

City	State	Zip Code
Tinley Park	IL	60477

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36492

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

C. Ronald Chiu

Mailing Address 18248 Cork Road

City	State	Zip Code
Tinley Park	IL	60477

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36699

Amount of Each Disbursement this Period

1227.99

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3539.83

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Circle K

Mailing Address 315 E. Walnut

City	State	Zip Code
Carbondale	IL	62901

Purpose of Disbursement
Gasolinje

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2014

Transaction ID : SB30B.36386

Amount of Each Disbursement this Period

40.41

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Thomas Cory

Mailing Address 2081 W. Monroe Street # 6

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36427

Amount of Each Disbursement this Period

947.16

Full Name (Last, First, Middle Initial)

C. William Cousinear

Mailing Address 2009 S. Glenwood

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36428

Amount of Each Disbursement this Period

4460.09

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5407.25

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. William Cousinear

Mailing Address 2009 S. Glenwood

City
SpringfieldState
ILZip Code
62704Purpose of Disbursement
Wages

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB30B.36624

Amount of Each Disbursement this Period

1	4	9	2	.	4	1
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Culligan of the Quad Cities

Mailing Address 701 W. 76th Street

City
DavenportState
IAZip Code
52806Purpose of Disbursement
Water

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36581

Amount of Each Disbursement this Period

3	0	5	.	7	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. CVS

Mailing Address 39161 Sheridan Road

City
Beach ParkState
ILZip Code
60099Purpose of Disbursement
O-Candy

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SB30B.36730

Amount of Each Disbursement this Period

2	0	.	4	4
---	---	---	---	---

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1	7	9	8	.	1	1
---	---	---	---	---	---	---

1	7	9	8	.	1	1
---	---	---	---	---	---	---

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. CVS

Mailing Address 2000 Skokie Valley Road

City

Highland Park

State

IL

Zip Code

60035

Purpose of Disbursement

N-Nails

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2014

Transaction ID : SB30B.36725

Amount of Each Disbursement this Period

6.29

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Marshall Derks

Mailing Address 328 S. Woodrow Street

City

Columbia

State

SC

Zip Code

29205

Purpose of Disbursement

Wages

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36493

Amount of Each Disbursement this Period

1503.25

Full Name (Last, First, Middle Initial)

C. Marshall Derks

Mailing Address 328 S. Woodrow Street

City

Columbia

State

SC

Zip Code

29205

Purpose of Disbursement

Wages

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36700

Amount of Each Disbursement this Period

1649.76

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3153.01

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Alex Dintruff

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Mailing Address 526 E. Prospect Avenue

City	State	Zip Code
Lake Bluff	IL	60044

Transaction ID : SB30B.36537Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1268.76

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Alex Dintruff

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Mailing Address 526 E. Prospect Avenue

City	State	Zip Code
Lake Bluff	IL	60044

Transaction ID : SB30B.36566Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1268.76

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Alex Dintruff

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Mailing Address 526 E. Prospect Avenue

City	State	Zip Code
Lake Bluff	IL	60044

Transaction ID : SB30B.36653Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1445.65

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3983.17

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Dollar Tree Stores

Mailing Address 2443 S. MacArthur Boulevard

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
G-Trash bags/tissue

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	28	/	2014

Transaction ID : SB30B.36513

Amount of Each Disbursement this Period

4.36

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Dunkin Donuts

Mailing Address 2829 22nd Street North

City	State	Zip Code
Chicago	IL	60664

Purpose of Disbursement
P-Food

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	19	/	2014

Transaction ID : SB30B.36736

Amount of Each Disbursement this Period

68.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Dunkin Donuts

Mailing Address 2829 22nd Street North

City	State	Zip Code
Chicago	IL	60664

Purpose of Disbursement
N-Food for workers

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	26	/	2014

Transaction ID : SB30B.36727

Amount of Each Disbursement this Period

58.28

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

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SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Jeffrey Easterling

Mailing Address 1787 Vermont Drive

City State Zip Code
Elk Grove IL 60007

Purpose of Disbursement
Wages

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 03 / 2014

Transaction ID : SB30B.36550

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

B. Jeffrey Easterling

Mailing Address 1787 Vermont Drive

City State Zip Code
Elk Grove IL 60007

Purpose of Disbursement
Wages

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 18 / 2014

Transaction ID : SB30B.36670

Amount of Each Disbursement this Period

1227.98

Full Name (Last, First, Middle Initial)

C. Elite Production

Mailing Address 23535 Maysville Road

City State Zip Code
Maysville IA 52773

Purpose of Disbursement
Flotus GOTV event Rock Island

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : SB30B.36809

Amount of Each Disbursement this Period

13995.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16306.83

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Frost Lighting

Mailing Address 1381 N. North Branch Street

City	State	Zip Code
Chicago	IL	60642

Purpose of Disbursement
Lighting, audio, speakers for Schneider event

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SB30B.36763

Amount of Each Disbursement this Period

22290.50

Full Name (Last, First, Middle Initial)

B. Joe Goodall

Mailing Address 1125 West Locust Street

City	State	Zip Code
Davenport	IA	52804

Purpose of Disbursement
Overnight construction

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36577

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. James Greene

Mailing Address 16 Park Road

City	State	Zip Code
Belmont	MA	02478

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36551

Amount of Each Disbursement this Period

877.06

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

23667.56

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. James Greene

Mailing Address 16 Park Road

City	State	Zip Code
Belmont	MA	02478

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36654

Amount of Each Disbursement this Period

1539.74

Full Name (Last, First, Middle Initial)

B. Edward Hall

Mailing Address 333 S. Lewis

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36420

Amount of Each Disbursement this Period

1112.76

Full Name (Last, First, Middle Initial)

C. Jason Harrison

Mailing Address 200 W. 3rd

City	State	Zip Code
Alton	IL	62002

Purpose of Disbursement
Food for event

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SB30B.36504

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2902.50

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Jason Harrison

Mailing Address 200 W. 3rd

City	State	Zip Code
Alton	IL	62002

Purpose of Disbursement
Food for event

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SB30B.36506

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Heaven Sent Catering

Mailing Address 1798 Summit Avenue

City	State	Zip Code
St. Louis	IL	62204

Purpose of Disbursement
L-BBQ Food for polls

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SB30B.36611

Amount of Each Disbursement this Period

110.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Heaven Sent Catering

Mailing Address 1798 Summit Avenue

City	State	Zip Code
St. Louis	IL	62204

Purpose of Disbursement
M-BBQ food for polls

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2014

Transaction ID : SB30B.36618

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

250.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Shane Henson

Mailing Address 30148 Oakview

City Livonia	State MI	Zip Code 48154
-----------------	-------------	-------------------

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36553

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

B. Shane Henson

Mailing Address 30148 Oakview

City Livonia	State MI	Zip Code 48154
-----------------	-------------	-------------------

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36671

Amount of Each Disbursement this Period

1227.99

Full Name (Last, First, Middle Initial)

C. Shane Henson

Mailing Address 30148 Oakview

City Livonia	State MI	Zip Code 48154
-----------------	-------------	-------------------

Purpose of Disbursement
Campaign Expenses see memo items-P

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		19		2014

Transaction ID : SB30B.36732

Amount of Each Disbursement this Period

99.04

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2410.88

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Mallory Hoyt

Mailing Address 2307 14 Avenue

City	State	Zip Code
Moline	IL	61265

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36460

Amount of Each Disbursement this Period

1668.55

Full Name (Last, First, Middle Initial)

B. Mallory Hoyt

Mailing Address 2307 14 Avenue

City	State	Zip Code
Moline	IL	61265

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36565

Amount of Each Disbursement this Period

1668.55

Full Name (Last, First, Middle Initial)

C. Mallory Hoyt

Mailing Address 2307 14 Avenue

City	State	Zip Code
Moline	IL	61265

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36683

Amount of Each Disbursement this Period

1227.98

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4565.08

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Brexton Isaacs

Mailing Address 917 Kingsway Lane

City	State	Zip Code
Byron	IL	61010

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36458

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

B. Brexton Isaacs

Mailing Address 917 Kingsway Lane

City	State	Zip Code
Byron	IL	61010

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36638

Amount of Each Disbursement this Period

1049.49

Full Name (Last, First, Middle Initial)

C. Dauntre Jenkins

Mailing Address 914 E. Willcox Street

City	State	Zip Code
Peoria	IL	61603

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36477

Amount of Each Disbursement this Period

1112.97

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3246.31

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Dauntre Jenkins

Mailing Address 914 E. Willcox Street

City	State	Zip Code
Peoria	IL	61603

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36642

Amount of Each Disbursement this Period

1078.61

Full Name (Last, First, Middle Initial)

B. Steven Johnson

Mailing Address 1411 E. Reservoir Street

City	State	Zip Code
Springfield	IL	62702

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36459

Amount of Each Disbursement this Period

540.84

Full Name (Last, First, Middle Initial)

C. Kevin Josephs

Mailing Address 1308 E. Campbell Street

City	State	Zip Code
Arlington Heights	IL	60004

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36554

Amount of Each Disbursement this Period

1083.85

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2703.30

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Kevin Josephs

Mailing Address 1308 E. Campbell Street

City	State	Zip Code
Arlington Heights	IL	60004

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36672

Amount of Each Disbursement this Period

1227.99

Full Name (Last, First, Middle Initial)

B. Elizabeth Jung

Mailing Address 25 Kassebaum Lane

City	State	Zip Code
Saint Louis	MO	63129

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36462

Amount of Each Disbursement this Period

1459.03

Full Name (Last, First, Middle Initial)

C. Elizabeth Jung

Mailing Address 25 Kassebaum Lane

City	State	Zip Code
Saint Louis	MO	63129

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36684

Amount of Each Disbursement this Period

1585.32

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4272.34

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Daniel Kallio

Mailing Address 3733 S. Lowe Avenue

City	State	Zip Code
Chicago	IL	60609

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36463

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

B. Daniel Kallio

Mailing Address 3733 S. Lowe Avenue

City	State	Zip Code
Chicago	IL	60609

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36685

Amount of Each Disbursement this Period

1227.99

Full Name (Last, First, Middle Initial)

C. Matthew Kalmick

Mailing Address 555 W. Strafford Place

City	State	Zip Code
Chicago	IL	60657

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36555

Amount of Each Disbursement this Period

1142.09

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3453.93

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Matthew Kalmick

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Mailing Address 555 W. Strafford Place

Transaction ID : SB30B.36673

City	State	Zip Code
Chicago	IL	60657

Amount of Each Disbursement this Period

Purpose of Disbursement
WagesCategory/
Type

1288.58

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Kimberly Kargman

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Mailing Address 221 Mt. Auburn Street

Transaction ID : SB30B.36538

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

Purpose of Disbursement
WagesCategory/
Type

1922.23

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Kimberly Kargman

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Mailing Address 221 Mt. Auburn Street

Transaction ID : SB30B.36567

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

Purpose of Disbursement
WagesCategory/
Type

1922.23

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5133.04

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Kimberly Kargman

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Mailing Address 221 Mt. Auburn Street

Transaction ID : SB30B.36655

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

Purpose of Disbursement
WagesCategory/
Type

2048.51

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Joseph Keefe

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Mailing Address 3638 Country Club

Transaction ID : SB30B.36556

Amount of Each Disbursement this Period

City	State	Zip Code
Gurnee	IL	60031

Purpose of Disbursement
WagesCategory/
Type

1083.85

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Joseph Keefe

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Mailing Address 3638 Country Club

Transaction ID : SB30B.36674

Amount of Each Disbursement this Period

City	State	Zip Code
Gurnee	IL	60031

Purpose of Disbursement
WagesCategory/
Type

1227.99

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4360.35

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Erin Kellogg

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address 457 Landings Loop W

City	State	Zip Code
Westerville	OH	43082

Transaction ID : SB30B.36478Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1108.54

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Erin Kellogg

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Mailing Address 457 Landings Loop W

City	State	Zip Code
Westerville	OH	43082

Transaction ID : SB30B.36643Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1074.18

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Kylie Kelly

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Mailing Address 10230 S. Bell

City	State	Zip Code
Chicago	IL	60643

Transaction ID : SB30B.36395Purpose of Disbursement
Per Diem

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

900.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3082.72

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Kylie Kelly

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Mailing Address 10230 S. Bell

Transaction ID : SB30B.36429

City	State	Zip Code
Chicago	IL	60643

Amount of Each Disbursement this Period

Purpose of Disbursement
Wages

Category/
Type

275.26

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Robert Kern

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address 1530 State Street

Transaction ID : SB30B.36494

Amount of Each Disbursement this Period

City	State	Zip Code
Bettendorf	IA	52722

Purpose of Disbursement
Wages

Category/
Type

1083.85

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Robert Kern

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Mailing Address 1530 State Street

Transaction ID : SB30B.36701

Amount of Each Disbursement this Period

City	State	Zip Code
Bettendorf	IA	52722

Purpose of Disbursement
Wages

Category/
Type

1227.98

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2587.09

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Claire Kimball

Mailing Address 934 Walnut Street

City	State	Zip Code
Deerfield	IL	60015

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36539

Amount of Each Disbursement this Period

1709.69

Full Name (Last, First, Middle Initial)

B. Claire Kimball

Mailing Address 934 Walnut Street

City	State	Zip Code
Deerfield	IL	60015

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36568

Amount of Each Disbursement this Period

1709.69

Full Name (Last, First, Middle Initial)

C. Claire Kimball

Mailing Address 934 Walnut Street

City	State	Zip Code
Deerfield	IL	60015

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36656

Amount of Each Disbursement this Period

1255.05

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4674.43

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Kenneth Kimber

Mailing Address 2217 Boysenberry Lane

City	State	Zip Code
Springfield	IL	62711

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36436

Amount of Each Disbursement this Period

1274.23

Full Name (Last, First, Middle Initial)

B. Kenneth Kimber

Mailing Address 2217 Boysenberry Lane

City	State	Zip Code
Springfield	IL	62711

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB30B.36626

Amount of Each Disbursement this Period

1274.23

Full Name (Last, First, Middle Initial)

C. Daniel Klein

Mailing Address 1824 S. Halstead

City	State	Zip Code
Chicago	IL	60608

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36479

Amount of Each Disbursement this Period

1083.85

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3632.31

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Daniel Klein

Mailing Address 1824 S. Halstead

City	State	Zip Code
Chicago	IL	60608

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36502

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

B. Daniel Klein

Mailing Address 1824 S. Halstead

City	State	Zip Code
Chicago	IL	60608

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36644

Amount of Each Disbursement this Period

1049.49

Full Name (Last, First, Middle Initial)

C. Brian Koppe

Mailing Address 265 Rosewood Avenue

City	State	Zip Code
Buffalo Grove	IL	60089

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36557

Amount of Each Disbursement this Period

1083.85

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3217.19

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Brian Koppe

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Mailing Address 265 Rosewood Avenue

Transaction ID : SB30B.36675

City	State	Zip Code
Buffalo Grove	IL	60089

Amount of Each Disbursement this Period

Purpose of Disbursement
WagesCategory/
Type

1227.98

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Kroger

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2014

Mailing Address 255 W. 1st Drive

Transaction ID : SB30B.36522

Amount of Each Disbursement this Period

City	State	Zip Code
Decatur	IL	62521

Purpose of Disbursement
G-Cleaning suppliesCategory/
Type

10.53

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Kroger

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2014

Mailing Address 255 W. 1st Drive

Transaction ID : SB30B.36524

Amount of Each Disbursement this Period

City	State	Zip Code
Decatur	IL	62521

Purpose of Disbursement
G-Cleaning suppliesCategory/
Type

18.70

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1227.98

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Ben Lenet

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Mailing Address 1547 W. Blackhawk Avenue

City	State	Zip Code
Chicago	IL	60642

Transaction ID : SB30B.36437Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2534.22

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Ben Lenet

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Mailing Address 1547 W. Blackhawk Avenue

City	State	Zip Code
Chicago	IL	60642

Transaction ID : SB30B.36627Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2534.21

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Benjamin Levin

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address 127 Chargeur Road

City	State	Zip Code
Reisterstown	MD	21136

Transaction ID : SB30B.36480Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1083.85

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6152.28

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Benjamin Levin

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Mailing Address 127 Chargeur Road

City	State	Zip Code
Reisterstown	MD	21136

Transaction ID : SB30B.36645Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1049.49

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Seth Levin

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address 127 Chargeur Road

City	State	Zip Code
Reisterstown	MD	21136

Transaction ID : SB30B.36481Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1454.60

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Seth Levin

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Mailing Address 127 Chargeur Road

City	State	Zip Code
Reisterstown	MD	21136

Transaction ID : SB30B.36507Purpose of Disbursement
Campaign expenses-G

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

219.90

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2723.99

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Seth Levin

Mailing Address 127 Chargeur Road

City	State	Zip Code
Reisterstown	MD	21136

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36646

Amount of Each Disbursement this Period

1362.66

Full Name (Last, First, Middle Initial)

B. Christopher Maley

Mailing Address 2517 W. Harbauer Lane

City	State	Zip Code
Springfield	IL	62702

Purpose of Disbursement
Per Diem

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SB30B.36392

Amount of Each Disbursement this Period

1190.00

Full Name (Last, First, Middle Initial)

C. Christopher Maley

Mailing Address 2517 W. Harbauer Lane

City	State	Zip Code
Springfield	IL	62702

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36421

Amount of Each Disbursement this Period

2927.33

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5479.99

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Christopher Maley

Mailing Address 2517 W. Harbauer Lane

City	State	Zip Code
Springfield	IL	62702

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB30B.36619

Amount of Each Disbursement this Period

958.82

Full Name (Last, First, Middle Initial)

B. Tim Mapes

Mailing Address 632 Old Tippercanoe

City	State	Zip Code
Springfield	IL	62707

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36424

Amount of Each Disbursement this Period

2483.97

Full Name (Last, First, Middle Initial)

C. Tim Mapes

Mailing Address 632 Old Tippercanoe

City	State	Zip Code
Springfield	IL	62707

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB30B.36621

Amount of Each Disbursement this Period

4042.77

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7485.56

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Jonathan Maxson

Mailing Address 400 E. Jefferson

City	State	Zip Code
Springfield	IL	62701

Purpose of Disbursement
Per Diem

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SB30B.36393

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

B. Jonathan Maxson

Mailing Address 400 E. Jefferson

City	State	Zip Code
Springfield	IL	62701

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36430

Amount of Each Disbursement this Period

1462.68

Full Name (Last, First, Middle Initial)

C. Sean McConnell

Mailing Address 4812 Bears Parkway

City	State	Zip Code
Springfield	IL	62711

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36423

Amount of Each Disbursement this Period

1222.90

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3585.58

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Sean McConnell

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Mailing Address 4812 Bears Parkway

City	State	Zip Code
Springfield	IL	62711

Transaction ID : SB30B.36620Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1222.90

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Anna McGreal

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Mailing Address 1717 W. 102nd Street

City	State	Zip Code
Chicago	IL	60643

Transaction ID : SB30B.36558Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1112.97

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Anna McGreal

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Mailing Address 1717 W. 102nd Street

City	State	Zip Code
Chicago	IL	60643

Transaction ID : SB30B.36676Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1259.49

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3595.36

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. David Mehundrew

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Mailing Address 121 Glen Aire Drive

City	State	Zip Code
Springfield	IL	62703

Transaction ID : SB30B.36431Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1388.24

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Edward Miller

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Mailing Address 57 North Beacon Street

City	State	Zip Code
Hartford	CT	06105

Transaction ID : SB30B.36381Purpose of Disbursement
Campaign Expenses-see memo items A

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

181.46

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Edward Miller

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address 57 North Beacon Street

City	State	Zip Code
Hartford	CT	06105

Transaction ID : SB30B.36464Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1413.47

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2983.17

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Edward Miller

Mailing Address 57 North Beacon Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36686

Amount of Each Disbursement this Period

1539.73

Full Name (Last, First, Middle Initial)

B. Max Miller

Mailing Address 915 South 6th Avenue

City	State	Zip Code
LaGrange	IL	60525

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36451

Amount of Each Disbursement this Period

1108.54

Full Name (Last, First, Middle Initial)

C. Max Miller

Mailing Address 915 South 6th Avenue

City	State	Zip Code
LaGrange	IL	60525

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36658

Amount of Each Disbursement this Period

1255.06

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3903.33

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Solomon Miller

Mailing Address 1640 Maple Avenue

City	State	Zip Code
Evanston	IL	60201

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36495

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

B. Solomon Miller

Mailing Address 1640 Maple Avenue

City	State	Zip Code
Evanston	IL	60201

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36702

Amount of Each Disbursement this Period

1227.99

Full Name (Last, First, Middle Initial)

C. Mission Control

Mailing Address 114A Mansfield Hollow Road

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement
Printing and production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SB30B.36750

Amount of Each Disbursement this Period

19019.64

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

21331.48

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Mission Control

Mailing Address 114A Mansfield Hollow Road

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement
Printing and production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB30B.36753

Amount of Each Disbursement this Period

120138.30

Full Name (Last, First, Middle Initial)

B. Mission Control

Mailing Address 114A Mansfield Hollow Road

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement
Printing and production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB30B.36756

Amount of Each Disbursement this Period

24699.42

Full Name (Last, First, Middle Initial)

C. Mission Control

Mailing Address 114A Mansfield Hollow Road

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement
Printing, Postage & Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		24		2014

Transaction ID : SB30B.36827

Amount of Each Disbursement this Period

45118.92

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

189956.64

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Moline Board of Education

Mailing Address 1619 11th Avenue

City	State	Zip Code
Moline	IL	61265

Purpose of Disbursement
Field house rental

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36587

Amount of Each Disbursement this Period

3969.06

Full Name (Last, First, Middle Initial)

B. Shahdi Montazeri

Mailing Address 20950 Norman Shores

City	State	Zip Code
Cornelius	NC	28031

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36482

Amount of Each Disbursement this Period

1112.97

Full Name (Last, First, Middle Initial)

C. Shahdi Montazeri

Mailing Address 20950 Norman Shores

City	State	Zip Code
Cornelius	NC	28031

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36647

Amount of Each Disbursement this Period

1078.61

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6160.64

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Fernando Montoya

Mailing Address 1600 Whittier Lane

City Wheaton	State IL	Zip Code 60189
-----------------	-------------	-------------------

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36483

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

B. Fernando Montoya

Mailing Address 1600 Whittier Lane

City Wheaton	State IL	Zip Code 60189
-----------------	-------------	-------------------

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36648

Amount of Each Disbursement this Period

1049.48

Full Name (Last, First, Middle Initial)

C. Felicia Moore

Mailing Address 420 S. Durkin Drive

City Springfield	State IL	Zip Code 62704
---------------------	-------------	-------------------

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36484

Amount of Each Disbursement this Period

1166.19

SUBTOTAL of Disbursements This Page (optional)..... ►

3299.52

TOTAL This Period (last page this line number only)..... ►

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SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Felicia Moore

Mailing Address 420 S. Durkin Drive

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36649

Amount of Each Disbursement this Period

1131.82

Full Name (Last, First, Middle Initial)

B. Alexander Morgan

Mailing Address 725 St. Johns Avenue

City	State	Zip Code
Highland Park	IL	60035

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36559

Amount of Each Disbursement this Period

1454.61

Full Name (Last, First, Middle Initial)

C. Alexander Morgan

Mailing Address 725 St. Johns Avenue

City	State	Zip Code
Highland Park	IL	60035

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36677

Amount of Each Disbursement this Period

1580.88

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4167.31

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Alexander Morgan

Mailing Address 725 St. Johns Avenue

City	State	Zip Code
Highland Park	IL	60035

Purpose of Disbursement
Campaign Expenses see memo items-N

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		19		2014

Transaction ID : SB30B.36715

Amount of Each Disbursement this Period

450.44

Full Name (Last, First, Middle Initial)

B. Andrew Mossman

Mailing Address 411 Wynona Road

City	State	Zip Code
Edwardsville	IL	62025

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36465

Amount of Each Disbursement this Period

1268.76

Full Name (Last, First, Middle Initial)

C. Andrew Mossman

Mailing Address 411 Wynona Road

City	State	Zip Code
Edwardsville	IL	62025

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36687

Amount of Each Disbursement this Period

1445.64

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3164.84

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Kathy Murray

Mailing Address 500 Wingate Drive

City	State	Zip Code
Sherman	IL	62684

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB30B.36623

Amount of Each Disbursement this Period

566.56

Full Name (Last, First, Middle Initial)

B. Russell Nagel

Mailing Address 529 S. Glenwood Avenue

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36432

Amount of Each Disbursement this Period

2709.18

Full Name (Last, First, Middle Initial)

C. Cassandra Nerby

Mailing Address 25 Timba Bah

City	State	Zip Code
Atlantic City	WY	82520

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36496

Amount of Each Disbursement this Period

1083.85

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4359.59

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Cassandra Nerby

Mailing Address 25 Timba Bah

City	State	Zip Code
Atlantic City	WY	82520

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36703

Amount of Each Disbursement this Period

1227.98

Full Name (Last, First, Middle Initial)

B. NGP Van

Mailing Address Grove Street

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
H- Predictive Dialer

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB30B.36528

Amount of Each Disbursement this Period

1500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Jason Nippa

Mailing Address 11411 Michican Drive

City	State	Zip Code
Spring Grove	IL	60081

Purpose of Disbursement
Per Diem

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SB30B.36394

Amount of Each Disbursement this Period

900.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2127.98

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Jason Nippa

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Mailing Address 11411 Michican Drive

Transaction ID : SB30B.36433

City	State	Zip Code
Spring Grove	IL	60081

Amount of Each Disbursement this Period

Purpose of Disbursement
WagesCategory/
Type

344.11

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Norval Northcott

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Mailing Address 1722 Sheridan

Transaction ID : SB30B.36412

City	State	Zip Code
Zion	IL	60099

Amount of Each Disbursement this Period

Purpose of Disbursement
RentCategory/
Type

300.00

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. North Park Rental Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Mailing Address 9624 N. Second

Transaction ID : SB30B.36573

City	State	Zip Code
Machesney Park	IL	61115

Amount of Each Disbursement this Period

Purpose of Disbursement
Hall rentalCategory/
Type

7244.11

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7888.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address Convenience Center Road

City	State	Zip Code
Champaign	IL	61820

Purpose of Disbursement
I-Toner

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2014

Transaction ID : SB30B.36531

Amount of Each Disbursement this Period

83.92

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 20 Caryle Plaza Drive

City	State	Zip Code
Belleville	IL	62208

Purpose of Disbursement
K-Toner

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2014

Transaction ID : SB30B.36596

Amount of Each Disbursement this Period

145.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Office Max

Mailing Address 5455 E. State Street

City	State	Zip Code
Rockford	IL	61108

Purpose of Disbursement
J-Office supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

Transaction ID : SB30B.36590

Amount of Each Disbursement this Period

88.34

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Ryanne Olsen

Mailing Address 117 E. Dodge Street

City	State	Zip Code
Jefferson	WI	53549

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36560

Amount of Each Disbursement this Period

1413.47

Full Name (Last, First, Middle Initial)

B. Ryanne Olsen

Mailing Address 117 E. Dodge Street

City	State	Zip Code
Jefferson	WI	53549

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36678

Amount of Each Disbursement this Period

1539.73

Full Name (Last, First, Middle Initial)

C. Erik Pannell

Mailing Address 953 Goetz Drive

City	State	Zip Code
East Saint Louis	IL	62203

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36466

Amount of Each Disbursement this Period

1171.21

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4124.41

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Erik Pannell

Mailing Address 953 Goetz Drive

City	State	Zip Code
East Saint Louis	IL	62203

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36688

Amount of Each Disbursement this Period

1317.70

Full Name (Last, First, Middle Initial)

B. Pivot Group, Inc.

Mailing Address 1720 I Street SW, Suite 550

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Printing and production

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SB30B.36751

Amount of Each Disbursement this Period

58511.22

Full Name (Last, First, Middle Initial)

C. Kathryn Pond

Mailing Address 449 19th Street NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36497

Amount of Each Disbursement this Period

1083.85

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

60912.77

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Kathryn Pond

Mailing Address 449 19th Street NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36704

Amount of Each Disbursement this Period

1227.98

Full Name (Last, First, Middle Initial)

B. Dara Postar

Mailing Address 1322 15th Street NW, Apt. 21

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Campaign expense-M

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2014

Transaction ID : SB30B.36617

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Quatro's Pizza

Mailing Address 218 W. Freeman Street

City	State	Zip Code
Carbondale	IL	62901

Purpose of Disbursement
B-Food for event

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB30B.36410

Amount of Each Disbursement this Period

246.66

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1427.98

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Quatro's Pizza

Mailing Address 218 W. Freeman Street

City	State	Zip Code
Carbondale	IL	62901

Purpose of Disbursement
K-Food for event

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB30B.36599

Amount of Each Disbursement this Period

177.03

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Quatro's Pizza

Mailing Address 218 W. Freeman Street

City	State	Zip Code
Carbondale	IL	62901

Purpose of Disbursement
K-Food for event

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36603

Amount of Each Disbursement this Period

177.03

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Quatro's Pizza

Mailing Address 218 W. Freeman Street

City	State	Zip Code
Carbondale	IL	62901

Purpose of Disbursement
K-Food for event

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

Transaction ID : SB30B.36609

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Quill Corporation

Mailing Address P.O. Box 37600

City	State	Zip Code
Philadelphia	PA	19101

Purpose of Disbursement
Office supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36503

Amount of Each Disbursement this Period

4493.35

Full Name (Last, First, Middle Initial)

B. Quill Corporation

Mailing Address P.O. Box 37600

City	State	Zip Code
Philadelphia	PA	19101

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2014

Transaction ID : SB30B.36534

Amount of Each Disbursement this Period

1773.80

Full Name (Last, First, Middle Initial)

C. Quill Corporation

Mailing Address P.O. Box 37600

City	State	Zip Code
Philadelphia	PA	19101

Purpose of Disbursement
Office supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36570

Amount of Each Disbursement this Period

326.92

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6594.07

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Quill Corporation

Mailing Address P.O. Box 37600

City	State	Zip Code
Philadelphia	PA	19101

Purpose of Disbursement
Office supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36571

Amount of Each Disbursement this Period

2499.03

Full Name (Last, First, Middle Initial)

B. Quill Corporation

Mailing Address P.O. Box 37600

City	State	Zip Code
Philadelphia	PA	19101

Purpose of Disbursement
Office supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

Transaction ID : SB30B.36594

Amount of Each Disbursement this Period

6451.95

Full Name (Last, First, Middle Initial)

C. Scott Redenbaugh

Mailing Address 611 W. Church

City	State	Zip Code
Champaign	IL	61820

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36485

Amount of Each Disbursement this Period

1413.46

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10364.44

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Scott Redenbaugh

Mailing Address 611 W. Church

City	State	Zip Code
Champaign	IL	61820

Purpose of Disbursement
Campaign expenses-I

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SB30B.36530

Amount of Each Disbursement this Period

83.92

Full Name (Last, First, Middle Initial)

B. Scott Redenbaugh

Mailing Address 611 W. Church

City	State	Zip Code
Champaign	IL	61820

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36650

Amount of Each Disbursement this Period

1321.51

Full Name (Last, First, Middle Initial)

C. Megan Reenock

Mailing Address 624 E. 9th Street

City	State	Zip Code
Northampton	PA	18067

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36452

Amount of Each Disbursement this Period

1083.85

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2489.28

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Megan Reenock

Mailing Address 624 E. 9th Street

City	State	Zip Code
Northhampton	PA	18067

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36659

Amount of Each Disbursement this Period

1227.98

Full Name (Last, First, Middle Initial)

B. Jackson Reid

Mailing Address 136 W. Glenlake Avenue

City	State	Zip Code
Roselle	IL	60172

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36561

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

C. Jackson Reid

Mailing Address 136 W. Glenlake Avenue

City	State	Zip Code
Roselle	IL	60172

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36679

Amount of Each Disbursement this Period

1227.98

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3539.81

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Lyndsey Reller

Mailing Address 313 S. Fillmore

City	State	Zip Code
Edwardsville	IL	62025

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36467

Amount of Each Disbursement this Period

1112.97

Full Name (Last, First, Middle Initial)

B. Lyndsey Reller

Mailing Address 313 S. Fillmore

City	State	Zip Code
Edwardsville	IL	62025

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36689

Amount of Each Disbursement this Period

1259.48

Full Name (Last, First, Middle Initial)

C. Janay Richmond

Mailing Address 4104 Indian Hill Drive

City	State	Zip Code
Country Club Hills	IL	60478

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36562

Amount of Each Disbursement this Period

1157.92

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3530.37

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Janay Richmond

Mailing Address 4104 Indian Hill Drive

City	State	Zip Code
Country Club Hills	IL	60478

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36680

Amount of Each Disbursement this Period

1304.42

Full Name (Last, First, Middle Initial)

B. Janay Richmond

Mailing Address 4104 Indian Hill Drive

City	State	Zip Code
Country Club Hills	IL	60478

Purpose of Disbursement
Campaign Expenses see memo items-0

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		19		2014

Transaction ID : SB30B.36729

Amount of Each Disbursement this Period

20.44

Full Name (Last, First, Middle Initial)

C. Kate Robbins

Mailing Address 923 W. Main Street

City	State	Zip Code
Belleville	IL	62222

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36468

Amount of Each Disbursement this Period

1881.09

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3205.95

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Kate Robbins

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Mailing Address 923 W. Main Street

City	State	Zip Code
Belleville	IL	62222

Transaction ID : SB30B.36690Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2007.36

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Thomas Rothe

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address 5106 Woodle Ranch Lane

City	State	Zip Code
Rockford	IL	61114

Transaction ID : SB30B.36498Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1083.85

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Thomas Rothe

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Mailing Address 5106 Woodle Ranch Lane

City	State	Zip Code
Rockford	IL	61114

Transaction ID : SB30B.36705Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1227.98

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4319.19

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Royal Performance

Mailing Address 2100 Western

City	State	Zip Code
Lisle	IL	60653

Purpose of Disbursement
Gasoline cards

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB30B.36390

Amount of Each Disbursement this Period

1863.50

Full Name (Last, First, Middle Initial)

B. Royal Performance

Mailing Address 2100 Western

City	State	Zip Code
Lisle	IL	60653

Purpose of Disbursement
Gasoline gift cards

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SB30B.36808

Amount of Each Disbursement this Period

2957.00

Full Name (Last, First, Middle Initial)

C. Royal Performance

Mailing Address 2100 Western

City	State	Zip Code
Lisle	IL	60653

Purpose of Disbursement
Gasoline cards

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2014

Transaction ID : SB30B.36616

Amount of Each Disbursement this Period

2138.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6958.50

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Bradley Ruppert

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Mailing Address 209 N. Lark Lane

City	State	Zip Code
Carbondale	IL	62901

Transaction ID : SB30B.36453Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1083.85

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Bradley Ruppert

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2014

Mailing Address 209 N. Lark Lane

City	State	Zip Code
Carbondale	IL	62901

Transaction ID : SB30B.36660Purpose of Disbursement
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1227.99

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Sam's Club

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Mailing Address 1350 W. Highway 50

City	State	Zip Code
O'Fallon	IL	62299

Transaction ID : SB30B.36443Purpose of Disbursement
E-Event food

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

66.11

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►

2311.84

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Schnucks

Mailing Address 2665 N. Illinois Street

City	State	Zip Code
Swansea	IL	62226

Purpose of Disbursement
F-Food for event

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36449

Amount of Each Disbursement this Period

126.77

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Schnucks

Mailing Address 2665 N. Illinois Street

City	State	Zip Code
Swansea	IL	62226

Purpose of Disbursement
K-Condiments

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2014

Transaction ID : SB30B.36606

Amount of Each Disbursement this Period

47.96

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Jeff Schuette

Mailing Address 420 W. Edwards

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36434

Amount of Each Disbursement this Period

1300.21

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1300.21

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Christopher Shallow

Mailing Address 8530 S. Michigan Avenue

City	State	Zip Code
Chicago	IL	60619

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36499

Amount of Each Disbursement this Period

1972.24

Full Name (Last, First, Middle Initial)

B. Christopher Shallow

Mailing Address 8530 S. Michigan Avenue

City	State	Zip Code
Chicago	IL	60619

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36706

Amount of Each Disbursement this Period

2098.51

Full Name (Last, First, Middle Initial)

C. Michelle Shui

Mailing Address 1468 Holbrook Lane

City	State	Zip Code
Batavia	IL	60510

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36500

Amount of Each Disbursement this Period

1083.85

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5154.60

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Michelle Shui

Mailing Address 1468 Holbrook Lane

City	State	Zip Code
Batavia	IL	60510

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36707

Amount of Each Disbursement this Period

1227.99

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 2490 West Wabash Avenue

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
G-Toner

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2014

Transaction ID : SB30B.36521

Amount of Each Disbursement this Period

90.04

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 1325 E. Main Street

City	State	Zip Code
Carbondale	IL	62901

Purpose of Disbursement
A-Ink

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : SB30B.36382

Amount of Each Disbursement this Period

84.62

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1227.99

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Justin Steele

Mailing Address 2814 Iowa Drive

City	State	Zip Code
Fort Collins	CO	80525

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36563

Amount of Each Disbursement this Period

1922.24

Full Name (Last, First, Middle Initial)

B. Justin Steele

Mailing Address 2814 Iowa Drive

City	State	Zip Code
Fort Collins	CO	80525

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36681

Amount of Each Disbursement this Period

2048.51

Full Name (Last, First, Middle Initial)

C. Hannah Stonebraker

Mailing Address 920 Bluff Street

City	State	Zip Code
Glencoe	IL	60022

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36564

Amount of Each Disbursement this Period

1112.97

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5083.72

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Hannah Stonebraker

Mailing Address 920 Bluff Street

City	State	Zip Code
Glencoe	IL	60022

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36682

Amount of Each Disbursement this Period

1259.49

Full Name (Last, First, Middle Initial)

B. Stephanie Sullivan

Mailing Address 1832 N. 19th Street

City	State	Zip Code
Springfield	IL	62702

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36422

Amount of Each Disbursement this Period

1300.20

Full Name (Last, First, Middle Initial)

C. Target Greatland

Mailing Address Parkway Point

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
G-Coffee

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SB30B.36516

Amount of Each Disbursement this Period

44.55

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2559.69

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Amanda Taylor

Mailing Address 1825 Florida

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36469

Amount of Each Disbursement this Period

933.12

Full Name (Last, First, Middle Initial)

B. Amanda Taylor

Mailing Address 1825 Florida

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36691

Amount of Each Disbursement this Period

1227.98

Full Name (Last, First, Middle Initial)

C. Terra Strategies, LLC

Mailing Address 100 East Grand, Suite 380

City	State	Zip Code
Des Moines	IA	50309

Purpose of Disbursement
Paid Canvass

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SB30B.36811

Amount of Each Disbursement this Period

190066.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192227.10

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Terra Strategies, LLC

Mailing Address 100 East Grand, Suite 380

City	State	Zip Code
Des Moines	IA	50309

Purpose of Disbursement
Paid Canvassing

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

Transaction ID : SB30B.36820

Amount of Each Disbursement this Period

65000.00

Full Name (Last, First, Middle Initial)

B. Terra Strategies, LLC

Mailing Address 100 East Grand, Suite 380

City	State	Zip Code
Des Moines	IA	50309

Purpose of Disbursement
Paid Canvass

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB30B.36824

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

C. The ASL Source

Mailing Address 736 Federal Street

City	State	Zip Code
Davenport	IA	52803

Purpose of Disbursement
Interpreting services

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36579

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

71400.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. The Home Depot

Mailing Address 2001 Belvidere Road

City
WaukeganState
ILZip Code
60085Purpose of Disbursement
P-Keys

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36737

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. The Strategy Group, Inc.Mailing Address 1603 Orrington Avenue
Suite 1730City
EvanstonState
ILZip Code
60201Purpose of Disbursement
Printing and production Enyart, gotv, VBM

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SB30B.36749

Amount of Each Disbursement this Period

54601.20

Full Name (Last, First, Middle Initial)

C. The Strategy Group, Inc.Mailing Address 1603 Orrington Avenue
Suite 1730City
EvanstonState
ILZip Code
60201Purpose of Disbursement
Production and Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SB30B.36812

Amount of Each Disbursement this Period

100026.36

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

154627.56

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Brandon Thompson

Mailing Address 908 G StreetSE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Campaign expenses-K

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2014

Transaction ID : SB30B.36595

Amount of Each Disbursement this Period

647.92

Full Name (Last, First, Middle Initial)

B. James Tinsley

Mailing Address 1304 W. Beardsley

City
UrbanaState
ILZip Code
61801Purpose of Disbursement
Wages

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36486

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

C. James Tinsley

Mailing Address 1304 W. Beardsley

City
UrbanaState
ILZip Code
61801Purpose of Disbursement
Wages

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36651

Amount of Each Disbursement this Period

1049.48

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2781.25

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Blaine Tisdale

Mailing Address 1110 Ravinia Court

City	State	Zip Code
Shorewood	IL	60404

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36471

Amount of Each Disbursement this Period

1083.85

Full Name (Last, First, Middle Initial)

B. Blaine Tisdale

Mailing Address 1110 Ravinia Court

City	State	Zip Code
Shorewood	IL	60404

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36692

Amount of Each Disbursement this Period

1227.98

Full Name (Last, First, Middle Initial)

C. US Postal Store

Mailing Address 120 W. Washington

City	State	Zip Code
Belleveille	IL	62220

Purpose of Disbursement
B-Stamps

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : SB30B.36408

Amount of Each Disbursement this Period

238.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2311.83

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Ryan Vickers

Mailing Address 207 Laurel Drive

City	State	Zip Code
Fairview Heights	IL	62208

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36472

Amount of Each Disbursement this Period

1080.83

Full Name (Last, First, Middle Initial)

B. Ryan Vickers

Mailing Address 207 Laurel Drive

City	State	Zip Code
Fairview Heights	IL	62208

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36693

Amount of Each Disbursement this Period

1224.99

Full Name (Last, First, Middle Initial)

C. Edward Visel

Mailing Address 1835 Bay Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36501

Amount of Each Disbursement this Period

1503.82

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3809.64

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Walgreens

Mailing Address 1811 Belvidere Road

City	State	Zip Code
Waukegan	IL	60085

Purpose of Disbursement
P-Cleaning supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB30B.36739

Amount of Each Disbursement this Period

5.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Walmart

Mailing Address 1450 E. Main

City	State	Zip Code
Carbondale	IL	62901

Purpose of Disbursement
Office supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		18		2014

Transaction ID : SB30B.36384

Amount of Each Disbursement this Period

56.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Walmart

Mailing Address 3401 Freedom Drive

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
G-Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

Transaction ID : SB30B.36520

Amount of Each Disbursement this Period

9.66

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Walmart

Mailing Address 3900 Fountain Square Pl.

City	State	Zip Code
Waukegan	IL	60085

Purpose of Disbursement
N-Ponchos and stamps

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

Transaction ID : SB30B.36720

Amount of Each Disbursement this Period

89.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Walmart

Mailing Address 3401 Freedom Drive

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement
G-Legal pads

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SB30B.36518

Amount of Each Disbursement this Period

7.11

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Waukegan MPO

Mailing Address 326 N. Genesee Street

City	State	Zip Code
Waukegan	IL	60085

Purpose of Disbursement
P-Mail

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2014

Transaction ID : SB30B.36734

Amount of Each Disbursement this Period

5.88

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Julius West

Mailing Address 325 P. St. SW Apt. # 912

City	State	Zip Code
Washington	DC	20024

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36454

Amount of Each Disbursement this Period

3398.26

Full Name (Last, First, Middle Initial)

B. Julius West

Mailing Address 325 P. St. SW Apt. # 912

City	State	Zip Code
Washington	DC	20024

Purpose of Disbursement
Campaign expenses-L

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2014

Transaction ID : SB30B.36610

Amount of Each Disbursement this Period

110.00

Full Name (Last, First, Middle Initial)

C. Julius West

Mailing Address 325 P. St. SW Apt. # 912

City	State	Zip Code
Washington	DC	20024

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36661

Amount of Each Disbursement this Period

1049.49

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4557.75

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Crystal Weston

Mailing Address 2634 Pine Street

City	State	Zip Code
Granite City	IL	62040

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36456

Amount of Each Disbursement this Period

1486.78

Full Name (Last, First, Middle Initial)

B. Crystal Weston

Mailing Address 2634 Pine Street

City	State	Zip Code
Granite City	IL	62040

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2014

Transaction ID : SB30B.36662

Amount of Each Disbursement this Period

1304.42

Full Name (Last, First, Middle Initial)

C. Ryan Winter

Mailing Address 1769 Lucky Debonair Court

City	State	Zip Code
Wheaton	IL	60189

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SB30B.36487

Amount of Each Disbursement this Period

1459.05

SUBTOTAL of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

4250.25

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 133 OF 162

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Ryan Winter

Mailing Address 1769 Lucky Debonair Court

City Wheaton	State IL	Zip Code 60189
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Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB30B.36652

Amount of Each Disbursement this Period

1367.09

Full Name (Last, First, Middle Initial)

B. Alyssa Zavislak

Mailing Address 1551 S. Lloyd

City Lombard	State IL	Zip Code 60148
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Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36541

Amount of Each Disbursement this Period

1413.47

Full Name (Last, First, Middle Initial)

C. Alyssa Zavislak

Mailing Address 1551 S. Lloyd

City Lombard	State IL	Zip Code 60148
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Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SB30B.36569

Amount of Each Disbursement this Period

1413.47

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4194.03

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Alyssa Zavislak

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2014

Mailing Address 1551 S. Lloyd

Transaction ID : SB30B.36657

City	State	Zip Code
Lombard	IL	60148

Amount of Each Disbursement this Period

Purpose of Disbursement
Wages

Category/ Type

1539.73

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Julian Zito

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Mailing Address 400 W. College Apt 1

Transaction ID : SB30B.36473

Amount of Each Disbursement this Period

City	State	Zip Code
Carbondale	IL	62901

Purpose of Disbursement
Wages

Category/ Type

1142.09

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Julian Zito

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2014

Mailing Address 400 W. College Apt 1

Transaction ID : SB30B.36694

Amount of Each Disbursement this Period

City	State	Zip Code
Carbondale	IL	62901

Purpose of Disbursement
Wages

Category/ Type

1288.58

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

3970.40

TOTAL This Period (last page this line number only)..... ►

1137236.53

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 135 OF 162

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 DEMOCRATIC PARTY OF ILLINOIS

NAME OF ACCOUNT
 DEMOCRATIC PARTY OF ILLINOIS

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

TOTAL AMOUNT TRANSFERRED

39015.64

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

39015.64

Transaction ID : H3.36339

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

39015.64

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

39015.64

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 136 OF 162

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Citrix Online, LLC		Transaction ID : H4.36361		Allocated Activity or Event:	
Mailing Address File 50264				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Los Angeles		State CA	Zip Code 90074	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Go to Webinar Service				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				<div> <div>10</div> <div>16</div> <div>2014</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.07			210.93		267.00

B. Full Name (Last, First, Middle Initial) Quill Corporation		Transaction ID : H4.36363		Allocated Activity or Event:	
Mailing Address P.O. Box 37600				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Philadelphia		State PA	Zip Code 19101	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office supplies				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				<div> <div>10</div> <div>17</div> <div>2014</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
184.80			695.18		879.98

C. Full Name (Last, First, Middle Initial) Mary Ladas		Transaction ID : H4.36364		Allocated Activity or Event:	
Mailing Address 90 Timberline Drive				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Lemont		State IL	Zip Code 60439	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Cab fare				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				<div> <div>10</div> <div>17</div> <div>2014</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20			15.80		20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
245.07		921.91		1166.98

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 137 OF 162

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) PNC Bank		Transaction ID : H4.36752		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 609				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Pittsburgh	State PA	Zip Code 15230-9738		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Bank charges		Category/ Type		Allocated Activity or Event Year-To-Date 415122.49	
Activity or Event Identifier: Administrative				Date 10 / 17 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
8.40			31.60		40.00

B. Full Name (Last, First, Middle Initial) Commonwealth Edison		Transaction ID : H4.36368		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 6111				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60197		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Utilities		Category/ Type		Allocated Activity or Event Year-To-Date 415205.00	
Activity or Event Identifier: Administrative				Date 10 / 19 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
17.33			65.18		82.51

C. Full Name (Last, First, Middle Initial) UPS		Transaction ID : H4.36370		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address Lockbox 577				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60132-0577		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Shipping		Category/ Type		Allocated Activity or Event Year-To-Date 415290.54	
Activity or Event Identifier: Administrative				Date 10 / 19 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
17.96			67.58		85.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.69		164.36		208.05

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 138 OF 162

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Quill Corporation		Transaction ID : H4.36371		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 37600				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Philadelphia	State PA	Zip Code 19101		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office supplce			Category/ Type	Allocated Activity or Event Year-To-Date 415757.57	
Activity or Event Identifier: Administrative				Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.08			368.95		467.03

B. Full Name (Last, First, Middle Initial) Commonwealth Edison		Transaction ID : H4.36372		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 6111				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60197		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Utilities			Category/ Type	Allocated Activity or Event Year-To-Date 415834.12	
Activity or Event Identifier: Administrative				Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.08			60.47		76.55

C. Full Name (Last, First, Middle Initial) Charter Communications		Transaction ID : H4.36373		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 790086				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City St. Louis	State MO	Zip Code 63179-0086		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Internet			Category/ Type	Allocated Activity or Event Year-To-Date 416048.12	
Activity or Event Identifier: Administrative				Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.94			169.06		214.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
159.10		598.48		757.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 139 OF 162

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) AT & T Teleconference Services			Transaction ID : H4.36375			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 5002								
City Carol Stream		State IL		Zip Code 60197				
Purpose of Disbursement: Conference telephone line				Category/ Type		Allocated Activity or Event Year-To-Date 416975.36		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="194.72"/>				<input type="text" value="732.52"/>				<input type="text" value="927.24"/>

B. Full Name (Last, First, Middle Initial) Comcast Cable			Transaction ID : H4.36391			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 3001								
City Southeastern		State PA		Zip Code 19398				
Purpose of Disbursement: TV and internet				Category/ Type		Allocated Activity or Event Year-To-Date 417146.84		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="36.01"/>				<input type="text" value="135.47"/>				<input type="text" value="171.48"/>

C. Full Name (Last, First, Middle Initial) UPS			Transaction ID : H4.36396			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Lockbox 577								
City Carol Stream		State IL		Zip Code 60132-0577				
Purpose of Disbursement: Shipping				Category/ Type		Allocated Activity or Event Year-To-Date 417233.26		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="18.15"/>				<input type="text" value="68.27"/>				<input type="text" value="86.42"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="248.88"/>		<input type="text" value="936.26"/>		<input type="text" value="1185.14"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Quill Corporation		Transaction ID : H4.36397		Allocated Activity or Event:	
Mailing Address P.O. Box 37600				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Philadelphia		State PA		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 19101				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office supplies				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		<div> <div>10</div> <div>24</div> <div>2014</div> </div>	
FEDERAL SHARE		+		NONFEDERAL SHARE	
26.77				100.71	
		=		TOTAL AMOUNT	
				127.48	

B. Full Name (Last, First, Middle Initial) Burnham Center		Transaction ID : H4.36399		Allocated Activity or Event:	
Mailing Address 111 West Washington				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Chicago		State IL		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 60602				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Rent				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		<div> <div>10</div> <div>24</div> <div>2014</div> </div>	
FEDERAL SHARE		+		NONFEDERAL SHARE	
374.52				1408.92	
		=		TOTAL AMOUNT	
				1783.44	

C. Full Name (Last, First, Middle Initial) R.W. Troxell and Company		Transaction ID : H4.36400		Allocated Activity or Event:	
Mailing Address 214 South Grand Avenue West				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Springfield		State IL		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 62708				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Insurnace				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		<div> <div>10</div> <div>26</div> <div>2014</div> </div>	
FEDERAL SHARE		+		NONFEDERAL SHARE	
233.10				876.90	
		=		TOTAL AMOUNT	
				1110.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
634.39		2386.53		3020.92

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 141 OF 162

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) CWLP			Transaction ID : H4.36401			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 300 South Seventh Street								
City Springfield		State IL		Zip Code 62757				
Purpose of Disbursement: Utilities				Category/ Type		Allocated Activity or Event Year-To-Date 420274.78		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="4.33"/>				<input type="text" value="16.27"/>				<input type="text" value="20.60"/>

B. Full Name (Last, First, Middle Initial) TTI National			Transaction ID : H4.36414			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 96003								
City Charlotte		State NC		Zip Code 28296-0003				
Purpose of Disbursement: Telephone				Category/ Type		Allocated Activity or Event Year-To-Date 420318.54		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="9.19"/>				<input type="text" value="34.57"/>				<input type="text" value="43.76"/>

C. Full Name (Last, First, Middle Initial) TTI National			Transaction ID : H4.36415			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 96003								
City Charlotte		State NC		Zip Code 28296-0003				
Purpose of Disbursement: Telephone				Category/ Type		Allocated Activity or Event Year-To-Date 420344.84		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="5.52"/>				<input type="text" value="20.78"/>				<input type="text" value="26.30"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="19.04"/>		<input type="text" value="71.62"/>		<input type="text" value="90.66"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Citi Cards		Transaction ID : H4.36416		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Processing Center P.O. Box 688901					
City Des Moines	State IA	Zip Code 50363			
Purpose of Disbursement: Fundraiser-D				Allocated Activity or Event Year-To-Date 430179.30	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 28 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2065.24			7769.22		9834.46

B. Full Name (Last, First, Middle Initial) Union League		Transaction ID : H4.36417		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 65 W. Jackson Boulevard					
City Chicago	State IL	Zip Code 60604			
Purpose of Disbursement: D-Fundraiser hall				Allocated Activity or Event Year-To-Date 430179.30	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 28 / 2014	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2065.24			7769.22		9834.46

C. Full Name (Last, First, Middle Initial) Kathy Murray		Transaction ID : H4.36425		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 500 Wingate Drive					
City Sherman	State IL	Zip Code 62684			
Purpose of Disbursement: Wages-spent <25% on FEA				Allocated Activity or Event Year-To-Date 431908.16	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 29 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
363.06			1365.80		1728.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2428.30		9135.02		11563.32

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Sarah Nelson		Transaction ID : H4.36438		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 655 W. Irving Park Road Apt. 5015				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Chicago	State IL	Zip Code 60613		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Wages spent < 25% on FEA				Allocated Activity or Event Year-To-Date 432224.38	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.41			249.81		316.22

B. Full Name (Last, First, Middle Initial) Emily Wurth		Transaction ID : H4.36439		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 2267 Boysenberry Lane				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Springfield	State IL	Zip Code 62711		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Wages spent < 25% on FEA				Allocated Activity or Event Year-To-Date 434104.62	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
394.85			1485.39		1880.24

C. Full Name (Last, First, Middle Initial) Powerplay Properties		Transaction ID : H4.36440		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1201 Veterans Parkway				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Springfield	State IL	Zip Code 62707		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Utilities				Allocated Activity or Event Year-To-Date 434112.43	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.64			6.17		7.81

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
462.90		1741.37		2204.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) UPS		Transaction ID : H4.36535		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address Lockbox 577				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60132-0577		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Shipping		Category/ Type		Allocated Activity or Event Year-To-Date 434195.60	
Activity or Event Identifier: Administrative				Date 11 / 02 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
17.47			65.70		83.17

B. Full Name (Last, First, Middle Initial) Powerplay Properties		Transaction ID : H4.36536		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1201 Veterans Parkway				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Springfield	State IL	Zip Code 62707		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Rent		Category/ Type		Allocated Activity or Event Year-To-Date 434474.16	
Activity or Event Identifier: Administrative				Date 11 / 03 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
58.50			220.06		278.56

C. Full Name (Last, First, Middle Initial) AT & T-P.O. Box 5080		Transaction ID : H4.36572		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 5080				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60197		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Telephone		Category/ Type		Allocated Activity or Event Year-To-Date 435387.83	
Activity or Event Identifier: Administrative				Date 11 / 03 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
191.87			721.80		913.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
267.84		1007.56		1275.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Safeguard Business Systems, Inc.			Transaction ID : H4.36615			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address P.O. Box 910947									
City Los Angeles		State CA		Zip Code 90091-0947					
Purpose of Disbursement: Checks				<div style="border: 1px solid black; width: 60px; height: 20px; margin: 0 auto;"></div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 150px; text-align: right;">436230.16</div>			
Activity or Event Identifier: Administrative						Date <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2014</div> </div>			
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT	
<div style="border: 1px solid black; width: 100px; text-align: right;">35.30</div>				<div style="border: 1px solid black; width: 100px; text-align: right;">132.78</div>				<div style="border: 1px solid black; width: 100px; text-align: right;">168.08</div>	

B. Full Name (Last, First, Middle Initial) Sarah Nelson			Transaction ID : H4.36628			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 655 W. Irving Park Road Apt. 5015									
City Chicago		State IL		Zip Code 60613					
Purpose of Disbursement: Wages				<div style="border: 1px solid black; width: 60px; height: 20px; margin: 0 auto;"></div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 150px; text-align: right;">437725.21</div>			
Activity or Event Identifier: Administrative						Date <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">13</div> <div style="border: 1px solid black; padding: 2px;">2014</div> </div>			
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT	
<div style="border: 1px solid black; width: 100px; text-align: right;">313.96</div>				<div style="border: 1px solid black; width: 100px; text-align: right;">1181.09</div>				<div style="border: 1px solid black; width: 100px; text-align: right;">1495.05</div>	

C. Full Name (Last, First, Middle Initial) Emily Wurth			Transaction ID : H4.36629			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 2267 Boysenberry Lane									
City Springfield		State IL		Zip Code 62711					
Purpose of Disbursement: Wages				<div style="border: 1px solid black; width: 60px; height: 20px; margin: 0 auto;"></div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 150px; text-align: right;">439168.30</div>			
Activity or Event Identifier: Administrative						Date <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">13</div> <div style="border: 1px solid black; padding: 2px;">2014</div> </div>			
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT	
<div style="border: 1px solid black; width: 100px; text-align: right;">303.05</div>				<div style="border: 1px solid black; width: 100px; text-align: right;">1140.04</div>				<div style="border: 1px solid black; width: 100px; text-align: right;">1443.09</div>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100px; text-align: right;">652.31</div>		<div style="border: 1px solid black; width: 100px; text-align: right;">2453.91</div>		<div style="border: 1px solid black; width: 100px; text-align: right;">3106.22</div>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<div style="border: 1px solid black; width: 100px; height: 20px;"></div>		<div style="border: 1px solid black; width: 100px; height: 20px;"></div>		<div style="border: 1px solid black; width: 100px; height: 20px;"></div>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Central Management Services			Transaction ID : H4.36633			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 10077								
City Springfield		State IL		Zip Code 62791				
Purpose of Disbursement: Insurance-employee spent <25% on FEA						Allocated Activity or Event Year-To-Date 440092.67		
Activity or Event Identifier: Administrative								
Category/ Type						Date <input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
194.12						730.25		
			=			TOTAL AMOUNT		
						924.37		

B. Full Name (Last, First, Middle Initial) Emily Wurth			Transaction ID : H4.36634			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2267 Boysenberry Lane								
City Springfield		State IL		Zip Code 62711				
Purpose of Disbursement: Insurance-employee spent <25% on FEA						Allocated Activity or Event Year-To-Date 440444.81		
Activity or Event Identifier: Administrative								
Category/ Type						Date <input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
73.95						278.19		
			=			TOTAL AMOUNT		
						352.14		

C. Full Name (Last, First, Middle Initial) Above & Beyond Cleaning			Transaction ID : H4.36635			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3631 S. 6th Street								
City Springfield		State IL		Zip Code 62703				
Purpose of Disbursement: Carpet cleaning						Allocated Activity or Event Year-To-Date 440569.81		
Activity or Event Identifier: Administrative								
Category/ Type						Date <input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
26.25						98.75		
			=			TOTAL AMOUNT		
						125.00		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.32		1107.19		1401.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) UPS		Transaction ID : H4.36637		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address Lockbox 577				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60132-0577		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Shipping		Category/ Type		Allocated Activity or Event Year-To-Date 440601.35	
Activity or Event Identifier: Administrative				Date 11 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
6.62			24.92		31.54

B. Full Name (Last, First, Middle Initial) AIG		Transaction ID : H4.36709		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 22427 Network Place				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Chicago	State IL	Zip Code 60673-1224		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Insurance workers compensation		Category/ Type		Allocated Activity or Event Year-To-Date 441590.35	
Activity or Event Identifier: Administrative				Date 11 / 18 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
207.69			781.31		989.00

C. Full Name (Last, First, Middle Initial) AT & T-P.O. Box 5014 Carol Stream		Transaction ID : H4.36710		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 5014				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60197		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Telephone		Category/ Type		Allocated Activity or Event Year-To-Date 441635.35	
Activity or Event Identifier: Administrative				Date 11 / 18 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
9.45			35.55		45.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
223.76		841.78		1065.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) ATT-Carol Stream		Transaction ID : H4.36711		Allocated Activity or Event:	
Mailing Address P.O. Box 5080				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Carol Stream		State IL	Zip Code 60197	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Telephone				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				<div> <div>11</div> <div>18</div> <div>2014</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.00			221.94		280.94

B. Full Name (Last, First, Middle Initial) ATT-Carol Stream		Transaction ID : H4.36712		Allocated Activity or Event:	
Mailing Address P.O. Box 5080				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Carol Stream		State IL	Zip Code 60197	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Telephone				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				<div> <div>11</div> <div>18</div> <div>2014</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
334.78			1259.42		1594.20

C. Full Name (Last, First, Middle Initial) Commonwealth Edison		Transaction ID : H4.36713		Allocated Activity or Event:	
Mailing Address P.O. Box 6111				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Carol Stream		State IL	Zip Code 60197	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Utilities				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date	
				<div> <div>11</div> <div>18</div> <div>2014</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.63			145.34		183.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
432.41		1626.70		2059.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Charter Communications		Transaction ID : H4.36714		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 790086					
City St. Louis	State MO	Zip Code 63179-0086			
Purpose of Disbursement: Internet				Allocated Activity or Event Year-To-Date 443838.97	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 18 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.35			114.16		144.51

B. Full Name (Last, First, Middle Initial) CWLP		Transaction ID : H4.36741		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 300 South Seventh Street					
City Springfield	State IL	Zip Code 62757			
Purpose of Disbursement: Utilities				Allocated Activity or Event Year-To-Date 443858.84	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 24 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.17			15.70		19.87

C. Full Name (Last, First, Middle Initial) Comcast Cable		Transaction ID : H4.36742		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 3001					
City Southeastern	State PA	Zip Code 19398			
Purpose of Disbursement: TV and internet				Allocated Activity or Event Year-To-Date 444027.32	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 24 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.38			133.10		168.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.90		262.96		332.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 151 OF 162

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Burnham Center			Transaction ID : H4.36743			Allocated Activity or Event:		
Mailing Address 111 West Washington						<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City	State	Zip Code				Allocated Activity or Event Year-To-Date		
Chicago	IL	60602				445836.26		
Purpose of Disbursement: Rent						Date		
Activity or Event Identifier: Administrative			Category/ Type			M M / D D / Y Y Y Y Y Y 11 / 24 / 2014		
FEDERAL SHARE			+	NONFEDERAL SHARE			=	TOTAL AMOUNT
379.88				1429.06				1808.94

B. Full Name (Last, First, Middle Initial) Perkins Coie			Transaction ID : H4.36744			Allocated Activity or Event:		
Mailing Address 607 Fourteenth Street N.W.						<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City	State	Zip Code				Allocated Activity or Event Year-To-Date		
Washington	DC	20005				446852.26		
Purpose of Disbursement: Attorney						Date		
Activity or Event Identifier: Administrative			Category/ Type			M M / D D / Y Y Y Y Y Y 11 / 24 / 2014		
FEDERAL SHARE			+	NONFEDERAL SHARE			=	TOTAL AMOUNT
213.36				802.64				1016.00

C. Full Name (Last, First, Middle Initial) Frye-Williamson Press, Inc.			Transaction ID : H4.36362			Allocated Activity or Event:		
Mailing Address P.O. Box 1057						<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City	State	Zip Code				Allocated Activity or Event Year-To-Date		
Springfield	IL	62705				194930.76		
Purpose of Disbursement: Printing						Date		
Activity or Event Identifier: 09-23-14 Fall Event(09/23/2014)			Category/ Type			M M / D D / Y Y Y Y Y Y 10 / 16 / 2014		
FEDERAL SHARE			+	NONFEDERAL SHARE			=	TOTAL AMOUNT
112.51				423.24				535.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
705.75		2654.94		3360.69

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
7029.25		26443.25		33472.50

SCHEDULE H5 (FEC Form 3X)**TRANSFERS OF LEVIN FUNDS RECEIVED FOR
ALLOCATED FEDERAL ELECTION ACTIVITY****(To be used by State, District and Local Party Committees Only)**PAGE 152 OF 162
FOR LINE 18b OF FORM 3XNAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOISNAME OF ACCOUNT
Democratic Party of IL Non Federal

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y
11 / 13 / 2014

TOTAL AMOUNT TRANSFERRED

164502.49

BREAKDOWN OF THIS TRANSFER

Transaction ID : H5.36768

i) **Voter Registration**

VOTER REGISTRATION

Total Amount Transferred for Voter Registration.....

0.00

ii) **Voter ID**

VOTER ID

Total Amount Transferred for Voter ID

0.00

iii) **GOTV**

GOTV

Total Amount Transferred for GOTV

0.00

iv) **Generic Campaign Activity**

GENERIC CAMPAIGN ACTIVITY

Total Amount Transferred for Generic Campaign Activity

164502.49

NAME OF ACCOUNT
Democratic Party of IL Non Federal

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y
11 / 13 / 2014

TOTAL AMOUNT TRANSFERRED

350.00

BREAKDOWN OF THIS TRANSFER

Transaction ID : H5.36769

i) **Voter Registration**

VOTER REGISTRATION

Total Amount Transferred for Voter Registration.....

0.00

ii) **Voter ID**

VOTER ID

Total Amount Transferred for Voter ID

0.00

iii) **GOTV**

GOTV

Total Amount Transferred for GOTV

0.00

iv) **Generic Campaign Activity**

GENERIC CAMPAIGN ACTIVITY

Total Amount Transferred for Generic Campaign Activity

350.00

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....

TOTAL This Period (Voter ID)

TOTAL This Period (GOTV).....

TOTAL This Period (Generic Campaign Activity).....

TOTAL This Period (Total Amount of Transfers Received).....

SCHEDULE H5 (FEC Form 3X)**TRANSFERS OF LEVIN FUNDS RECEIVED FOR
ALLOCATED FEDERAL ELECTION ACTIVITY****(To be used by State, District and Local Party Committees Only)**PAGE 153 OF 162
FOR LINE 18b OF FORM 3XNAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOISNAME OF ACCOUNT
Democratic Party of IL Non Federal

DATE OF RECEIPT

MM / DD / YYYY
11 / 13 / 2014

TOTAL AMOUNT TRANSFERRED

145.25

BREAKDOWN OF THIS TRANSFER

Transaction ID : H5.36770

i) **Voter Registration**

VOTER REGISTRATION

Total Amount Transferred for Voter Registration.....

0.00

ii) **Voter ID**

VOTER ID

Total Amount Transferred for Voter ID

0.00

iii) **GOTV**

GOTV

Total Amount Transferred for GOTV

0.00

iv) **Generic Campaign Activity**

GENERIC CAMPAIGN ACTIVITY

Total Amount Transferred for Generic Campaign Activity

145.25

NAME OF ACCOUNT

DATE OF RECEIPT

MM / DD / YYYY

TOTAL AMOUNT TRANSFERRED

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

VOTER REGISTRATION

Total Amount Transferred for Voter Registration.....

ii) **Voter ID**

VOTER ID

Total Amount Transferred for Voter ID

iii) **GOTV**

GOTV

Total Amount Transferred for GOTV

iv) **Generic Campaign Activity**

GENERIC CAMPAIGN ACTIVITY

Total Amount Transferred for Generic Campaign Activity

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....

0.00

TOTAL This Period (Voter ID)

0.00

TOTAL This Period (GOTV).....

0.00

TOTAL This Period (Generic Campaign Activity).....

164997.74

TOTAL This Period (Total Amount of Transfers Received).....

164997.74

SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR ALLOCATED FEDERAL ELECTION ACTIVITY
(To be used by State, District and Local Party Committees Only)

PAGE 154 OF 162

FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) / Full Organization Name

Paladin Political Group, LLC

Transaction ID : H6.36814

Mailing Address 29 S. LaSalle Street

City	State	Zip Code
Chicago	IL	60603

Purpose of Disbursement
Vote by mail
Category/
Type

Type of Allocated Activity or Event:

☒ Voter Registration ☐ GOTV
☐ Voter ID ☐ Generic Campaign

Allocated Activity or Event Year-To-Date

23279.28

Date

M M M	/	D D D	/	Y Y Y Y Y
11	/	03	/	2014

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

4888.65

18390.63

23279.28

B. Full Name (Last, First, Middle Initial) / Full Organization Name

The Sexton Group

Transaction ID : H6.36817

Mailing Address 321 N. Clark

City	State	Zip Code
Chicago	IL	60654

Purpose of Disbursement
GOTV Calls
Category/
Type

Type of Allocated Activity or Event:

☐ Voter Registration ☒ GOTV
☐ Voter ID ☐ Generic Campaign

Allocated Activity or Event Year-To-Date

66004.40

Date

M M M	/	D D D	/	Y Y Y Y Y
11	/	04	/	2014

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

13860.92

52143.48

66004.40

C. Full Name (Last, First, Middle Initial) / Full Organization Name

U.S. Postmaster

Transaction ID : H6.36745

Mailing Address 132 N. Kansas

City	State	Zip Code
Edwardsville	IL	62025-9998

Purpose of Disbursement
Postage
Category/
Type

Type of Allocated Activity or Event:

☐ Voter Registration ☐ GOTV
☐ Voter ID ☒ Generic Campaign

Allocated Activity or Event Year-To-Date

1468806.88

Date

M M M	/	D D D	/	Y Y Y Y Y
10	/	16	/	2014

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

210.00

790.00

1000.00

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

18959.57

71324.11

90283.68

TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

TOTAL AMOUNT

LEVIN SHARE

TOTAL This Period for the Levin Share

SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR ALLOCATED FEDERAL ELECTION ACTIVITY
 (To be used by State, District and Local Party Committees Only)

PAGE 155 OF 162
 FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) / Full Organization Name

U.S. Postmaster

Transaction ID : H6.36747

Mailing Address 95 State Street

City	State	Zip Code
Peoria	IL	61601

Purpose of Disbursement
Postage

001

Category/
Type

Type of Allocated Activity or Event:

<input type="checkbox"/> Voter Registration	<input type="checkbox"/> GOTV
<input type="checkbox"/> Voter ID	<input checked="" type="checkbox"/> Generic Campaign

Allocated Activity or Event Year-To-Date

1469306.88

Date

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2014

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

105.00

395.00

500.00

B. Full Name (Last, First, Middle Initial) / Full Organization Name

Ambrosino Muir Hansen Crounse

Transaction ID : H6.36754

Mailing Address 500 Sansome Street

City	State	Zip Code
San Francisco	CA	94111

Purpose of Disbursement
Vote by mail mailing

006

Category/
Type

Type of Allocated Activity or Event:

<input type="checkbox"/> Voter Registration	<input type="checkbox"/> GOTV
<input type="checkbox"/> Voter ID	<input checked="" type="checkbox"/> Generic Campaign

Allocated Activity or Event Year-To-Date

1485056.88

Date

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2014

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

3307.50

12442.50

15750.00

C. Full Name (Last, First, Middle Initial) / Full Organization Name

U.S. Postmaster

Transaction ID : H6.36757

Mailing Address 5225 Harrison Avenue

City	State	Zip Code
Rockford	IL	61125-9300

Purpose of Disbursement
Postage

001

Category/
Type

Type of Allocated Activity or Event:

<input type="checkbox"/> Voter Registration	<input type="checkbox"/> GOTV
<input type="checkbox"/> Voter ID	<input checked="" type="checkbox"/> Generic Campaign

Allocated Activity or Event Year-To-Date

1485806.88

Date

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2014

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

157.50

592.50

750.00

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

3570.00

13430.00

17000.00

TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

TOTAL AMOUNT

TOTAL This Period for the Levin Share

LEVIN SHARE

SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR ALLOCATED FEDERAL ELECTION ACTIVITY
(To be used by State, District and Local Party Committees Only)

PAGE 156 OF 162

FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) / Full Organization Name

U.S. Postmaster

Transaction ID : H6.36759

Mailing Address 2001 N. Mattis Avenue

City	State	Zip Code
Champaign	IL	61821-9998

Purpose of Disbursement
PostageCategory/
Type
001

Type of Allocated Activity or Event:

☐ Voter Registration
☐ Voter ID
☒ GOTV
☒ Generic Campaign

Allocated Activity or Event Year-To-Date

1486556.88

Date

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2014

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

157.50

592.50

750.00

B. Full Name (Last, First, Middle Initial) / Full Organization Name

U.S. Postmaster

Transaction ID : H6.36761

Mailing Address 120 W. Washington Street

City	State	Zip Code
Belleville	IL	62220-9998

Purpose of Disbursement
PostageCategory/
Type
001

Type of Allocated Activity or Event:

☐ Voter Registration
☐ Voter ID
☒ GOTV
☒ Generic Campaign

Allocated Activity or Event Year-To-Date

1487556.88

Date

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2014

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

210.00

790.00

1000.00

C. Full Name (Last, First, Middle Initial) / Full Organization Name

Type of Allocated Activity or Event:

☐ Voter Registration
☐ Voter ID
☐ GOTV
☐ Generic Campaign

Allocated Activity or Event Year-To-Date

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Date

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

367.50

1382.50

1750.00

TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

22897.07

LEVIN SHARE

86136.61

TOTAL AMOUNT

109033.68

TOTAL This Period for the Levin Share

SCHEDULE L (FEC Form 3X)**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID : SL36772

NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS		
NAME OF ACCOUNT Democratic Party of IL Non Federal		
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
(a) Itemized (Use Schedule L-A)	0.00	30000.00
(b) Unitemized	0.00	0.00
(c) Total	0.00	30000.00
2. OTHER RECEIPTS	12450.00	919850.00
3. TOTAL RECEIPTS (Add Lines 1c and 2)	12450.00	949850.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration	0.00	0.00
(b) Voter ID	0.00	0.00
(c) GOTV	0.00	0.00
(d) Generic Campaign	164997.74	947900.20
(e) Total	164997.74	947900.20
5. OTHER DISBURSEMENTS	0.00	0.00
6. TOTAL DISBURSEMENTS (Add Lines 4e and 5)	164997.74	947900.20
7. BEGINNING CASH ON HAND (for Column B, use cash as of January 1st)	154497.54	0.00
8. RECEIPTS (from Line 3)	12450.00	949850.00
9. SUBTOTAL (Add Lines 7 and 8)	166947.54	949850.00
10. DISBURSEMENTS (From Line 6)	164997.74	947900.20
11. ENDING CASH ON HAND (Subtract Line 10 From Line 9)	1949.80	1949.80

SCHEDULE L-A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDSUse separate schedule(s)
for each category of the
Aggregation Page

PAGE 158 OF 162

FOR LINE NUMBER:
(check only one)☐ 1a☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial) / Full Organization Name

A. Aptus Strategies

Account : 18789

Mailing Address P.O. Box 53

City
ChicagoState
ILZip Code
60654

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SASL2.36775

Amount of Each Receipt this Period

150.00

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

B. Arab American Democratic Club

Account : 18789

Mailing Address 10500 Southwest Highway

City
Chicago RidgeState
ILZip Code
60415

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SASL2.36777

Amount of Each Receipt this Period

250.00

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

C. Arnstein & Lehr

Account : 18789

Mailing Address 120 South Riverside

City
ChicagoState
ILZip Code
60606

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SASL2.36779

Amount of Each Receipt this Period

300.00

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

D. Bristol-Myers Squibb Company

Account : 18789

Mailing Address P.O. Box 25277

City
TampaState
FLZip Code
33622

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SASL2.36783

Amount of Each Receipt this Period

1000.00

Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1700.00

SCHEDULE L-A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDSUse separate schedule(s)
for each category of the
Aggregation Page

PAGE 161 OF 162

FOR LINE NUMBER:
(check only one)☐ 1a☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial) / Full Organization Name

A. Coy Pugh and Associates, LLC

Account : 18789

Mailing Address 5821 S. Calcumet

City State Zip Code
Chicago IL 60637

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 25 2014

Transaction ID : SASL2.36795

Amount of Each Receipt this Period

900.00

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

B. Cuda Law Offices

Account : 18789

Mailing Address 6525 North Avenue, Suite 204

City State Zip Code
Oak Park IL 60302

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 25 2014

Transaction ID : SASL2.36797

Amount of Each Receipt this Period

1000.00

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

C. Dan Shomon, Inc.

Account : 18789

Mailing Address 33 West Monroe, Suite 1050

City State Zip Code
Chicago IL 60603

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 25 2014

Transaction ID : SASL2.36799

Amount of Each Receipt this Period

500.00

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

D. DeVry

Account : 18789

Mailing Address 3005 Highland Parkway

City State Zip Code
Downers Grove IL 60515

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 25 2014

Transaction ID : SASL2.36801

Amount of Each Receipt this Period

2500.00

Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4900.00

12450.00

SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS

Use separate schedule(s)
for each category of the
Aggregation Page

FOR LINE NUMBER: PAGE 162 OF 162

(check only one) ☐ 4a ☐ 4c ☐ 5
☐ 4b ☒ 4d

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial) / Full Organization Name

A. DEMOCRATIC PARTY OF ILLINOIS

Mailing Address P.O. BOX 518

City State Zip Code
 SPRINGFIELD IL 62705

Purpose of Disbursement
 Transfer from Levin Funds

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 11 13 2014

Transaction ID : SBSL4D.36805

Amount of Each Disbursement this Period

164502.49

Account : 18789

Full Name (Last, First, Middle Initial) / Full Organization Name

B. DEMOCRATIC PARTY OF ILLINOIS

Mailing Address P.O. BOX 518

City State Zip Code
 SPRINGFIELD IL 62705

Purpose of Disbursement
 Transfer from Levin Funds

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 11 13 2014

Transaction ID : SBSL4D.36806

Amount of Each Disbursement this Period

350.00

Account : 18789

Full Name (Last, First, Middle Initial) / Full Organization Name

C. DEMOCRATIC PARTY OF ILLINOIS

Mailing Address P.O. BOX 518

City State Zip Code
 SPRINGFIELD IL 62705

Purpose of Disbursement
 Transfer from Levin Funds

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 11 13 2014

Transaction ID : SBSL4D.36807

Amount of Each Disbursement this Period

145.25

Account : 18789

Full Name (Last, First, Middle Initial) / Full Organization Name

D.

Mailing Address

City State Zip Code

Purpose of Disbursement

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Full Name (Last, First, Middle Initial) / Full Organization Name

E.

Mailing Address

City State Zip Code

Purpose of Disbursement

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

164997.74

164997.74